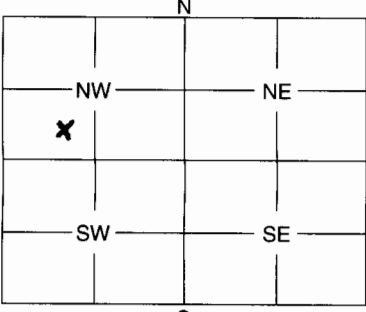


1	LOCATION OF WATER WELL:	Fraction	Section	Number	Township	Number	Range	Number
	County: <u>Johnson</u>	<u>SE 1/4 SW 1/4 NW 1/4</u>	<u>9</u>		<u>12S</u>	<u>2</u>	<u>24E</u>	E/W

Distance and direction from nearest town or city street address of well if located within city?

Johnson Drive & Alden

2	WATER WELL OWNER: <u>McAnany Construction</u>	Board of Agriculture, Division of Water Resources
	RR #, St. Address, Box #: <u>15320 Midland</u>	Application Number: _____
	City, State, ZIP Code: <u>Shawnee, KS 66217</u>	

3	MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4	DEPTH OF WELL <u>45</u> ft.
			WELL'S STATIC WATER LEVEL <u>0</u> ft.
			WELL WAS USED AS:
			<input checked="" type="checkbox"/> 1 Domestic <input type="checkbox"/> 2 Irrigation <input type="checkbox"/> 3 Feedlot <input type="checkbox"/> 4 Industrial <input type="checkbox"/> 5 Public Water Supply <input type="checkbox"/> 6 Oil Field Water Supply <input type="checkbox"/> 7 Domestic (Lawn & Garden) <input type="checkbox"/> 8 Air Conditioning <input type="checkbox"/> 9 Dewatering <input type="checkbox"/> 10 Monitoring Well <input type="checkbox"/> 11 Injection Well <input type="checkbox"/> 12 Other _____
			Was a chemical / bacteriological sample submitted to Department? Yes _____ No <u>X</u> _____
			If yes, mo/day/yr sample was submitted _____
			Water Well Disinfected: Yes <u>X</u> No _____

5	TYPE OF BLANK CASING USED:
	1 Steel      3 RMP (SR)      5 Wrought      7 Fiberglass      9 Other (Specify below) <u>Rock lined</u> 2 PVC      4 ABS      6 Asbestos-Cement      8 Concrete Tile
	Blank casing diameter <u>60</u> in.      Was casing pulled? Yes _____ No _____      If yes, how much _____ in.
	Casing height above or below land surface _____ in.

6	GROUT PLUG MATERIAL: <u>1 Neat cement</u> 2 Cement grout <u>3 Bentonite</u> 4 Other _____
	Grout Plug Intervals: From _____ ft. to _____ ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.
	What is the nearest source of possible contamination:
	1 Septic tank      6 Seepage pit      11 Fuel storage      16 Other (specify below) <u>unknown well in Empty Field</u> 2 Sewer lines      7 Pit privy      12 Fertilizer storage 3 Watertight sewer lines      8 Sewage lagoon      13 Insecticide storage 4 Lateral lines      9 Feedyard      14 Abandoned water well 5 Cess pool      10 Livestock pens      15 Oil well/Gas well
	Direction from well? _____ How many feet? _____

FROM	TO	PLUGGING MATERIALS
<u>45</u>	<u>10</u>	<u>sand</u>
<u>10</u>	<u>9</u>	<u>Bentonite</u>
<u>9</u>	<u>8</u>	<u>cement</u>
<u>8</u>	<u>0</u>	<u>clay</u>

Grading May lower Surface elevation

7	CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) <u>7-17-06</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>240</u> This Water Well Record was completed on (mo/day/year) <u>7-17-06</u> under the business name of <u>Young Drilling Co</u> by (signature) <u>Daniel Young</u>
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INSTRUCTIONS: Use typewriter or ball point pen. Please press firmly and print clearly. Please fill in blanks, underline or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Ste. 420, Topeka, Kansas 66612-1367. Telephone: 785/296-5522. Send one to Water Well Owner and retain one for your records.