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|--|------|--|--------------------|-----------------|----------------|
| 1 LOCATION OF WATER WELL: | | Fraction | Section Number | Township Number | Range Number |
| County: Johnson | | SE 1/4 SW 1/4 SE 1/4 | 11 | 12 | 24-East |
| Distance and direction from nearest town or city street address of well if located within city? 10704 Shawnee Mission Parkway, Shawnee, Kansas | | | | | |
| 2 WATER WELL OWNER: Mark Hoelting | | | | | |
| RR#, St. Address, Box # 5681 Widmer Road | | | | | |
| City, State, ZIP Code : Shawnee, Kansas 66216 | | | | | |
| Board of Agriculture, Division of Water Resources Application Number: | | | | | |
| 3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX: | | 4 DEPTH OF WELL 13.0 ft. | | | |
| <div style="text-align: center;">N W E SW SE S</div> | | WELL'S STATIC WATER LEVEL 11.92 ft. | | | |
| | | WELL WAS USED AS: | | | |
| | | 1 Domestic 5 Public Water Supply 9 Dewatering | | | |
| | | 2 Irrigation 6 Oil Field Water Supply 10 Monitoring Well | | | |
| 3 Feedlot 7 Lawn and Garden (domestic) 11 Injection Well | | | | | |
| 4 Industrial 8 Air Conditioning 12 Other | | | | | |
| Was a chemical/bacteriological sample submitted to Department? Yes No X | | | | | |
| If yes, mo/day/yr sample was submitted | | | | | |
| Water Well Disinfected: Yes No X | | | | | |
| 5 TYPE OF BLANK CASING USED: | | | | | |
| 1 Steel 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (specify below) | | | | | |
| 2 PVC 4 ABC 6 Asbestos-Cement 8 Concrete Tile | | | | | |
| Blank casing diameter 2.375 in. Was casing pulled? Yes No X If yes, how much? N/A | | | | | |
| Casing height above or below land surface Unknown in. Casing plugged; casing removed to depth of 3' BTOC. | | | | | |
| 6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other Soils | | | | | |
| Grout Plug Intervals From 13.0 ft. to 3.0 ft. From 3.0 ft. to 0.0 ft. From ft. to ft. | | | | | |
| What is the nearest source of possible contamination: | | | | | |
| 1 Septic tank 6 Seepage pit 11 Fuel storage (former) 16 Other (specify below) | | | | | |
| 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? Northeast How many feet? 75 | | | | | |
| FROM | TO | CODE | PLUGGING MATERIALS | | |
| 0.0 | 3.0 | | Compacted soils | | |
| 3.0 | 13.0 | | Bentonite chips | | |
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| 7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/yr) 08/28/09 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 692 This Water Well Record was completed on (mo/day/yr) 09/06/09 under the business name of Quad State Services, Inc. by (signature) | | | | | |
| INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment, Bureau of Water, 1000 S W Jackson St., Ste. 420, Topeka, Kansas 66620-0001. Telephone: 785-296-3565. Send one to Water Well Owner and retain one for your records. | | | | | |

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