

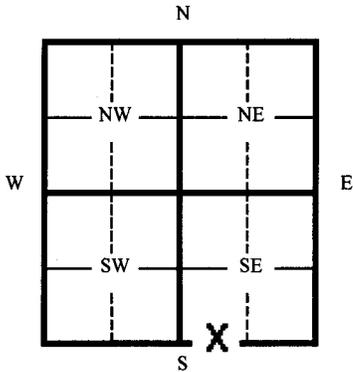
1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: Johnson	SE 1/4 SW 1/4 SE 1/4	11	12	24-East

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	Board of Agriculture, Division of Water Resources Application Number:
RR#, St. Address, Box # 5681 Widmer Road	
City, State, ZIP Code : Shawnee, Kansas 66216	

3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:



4 DEPTH OF WELL	13.0	ft.
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.	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

RECEIVED

SEP 04 2009

BUREAU OF ENVIRONMENTAL REMEDIATION

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) _____
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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.