1	LOCATI	ON OF WAT	ER WELL:	Fraction		Section I	Number	Township	Number	Range	Number	
Cou	inty: 🕥	oual	25	SE10 -	14-21	53-SE4	10	Endora	. 14	21	E/W	
Distance and direction from nearest town or city street address of well if located within city?												
Eudora 7 mi. south												
WATER WELL OWNER: Tay Dee Brecheisen												
WATER WELL OWNER: Tay Dee Brecheise N RR #, St. Address, Box #: City, State, ZIP Code : Lawrence Kans 66046 Board of Agriculture, Division of Water Resources Application Number:												
3	MARK		ATION WITH	d DEPTH OF WELL								
				WELL WAS USED AS:								
w	NW		- NE		Domestic 2 Irrigation 3 Feedlot 4 Industrial	5 Public W 6 Oil Field 7 Domestic 8 Air Cond	Water Support (Lawn & G	oly 1 Sarden) 1	9 Dewater 0 Monitorion 1 Injection 2 Other	ng Well		
	sw	sw — se —		Was a chemical / bacteriological sample submitted to Department? Yes								
l		Water Well Disinfected: YesX No										
5	5 TYPE OF BLANK CASING USED:											
1 Steel 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (Specify below) 2 PVC 4 ABS 6 Asbestos-Cement 8 Concrete Tile												
Blank casing diameter in. Was casing pulled? Yes No If yes, how much Casing height above or below land surface in.												
6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other												
Grout Plug Intervals: From												
	1 Se 2 Se 3 W 4 Le 5 Ce	eptic tank ewer lines atertight sew ateral lines ess pool	er lines	6 Seep 7 Pit p 8 Sew 9 Feed	page pit rivy age lagoon	12 Fertiliz 13 Insection	11 Fuel storage 16 12 Fertilizer storage 13 Insecticide storage Abandoned water well 15 Oil well/Gas well			6 Other (specify below) R.o.a.dD.J.C.h		
	Direction	on from well?	South		How man	y feet?6						
FROM TO PLUGGING MATERIALS												
13.5 6.5 San		Sand										
6.5		4.5	Subso.	1								
4.5		4.0	Benton	lite								
4.0		D	Topsoil	1								
			,									
CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year)												
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.												

WATER WELL PLUGGING RECORD Form WWC-5P KSA 82a-1212 ID NO._____