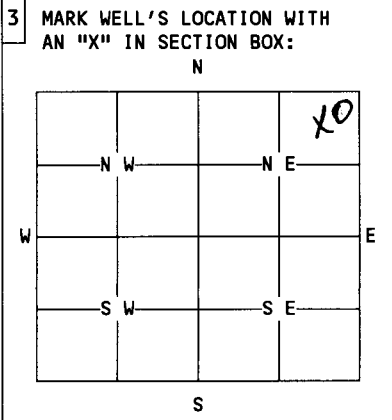


1 LOCATION OF WATER WELL: Fraction ^{IN HANOVER} NE 1/4 NE 1/4 NE 1/4 Section Number 8 Township Number 2 Range Number 5
 County: Washington

Distance and direction from nearest town or city street address of well, if located within city? ^{Less than} Hanover City Limits is close to well - West of Hanover 1/4 mile

2 WATER WELL OWNER: Cheryl Reith
 RR#, St. Address, Box #: GARY AND 128 N. Wulff
 City, State, ZIP Code: Hanover, MO 64945 Board of Agriculture, Division of Water Resources Application Number:



4 DEPTH OF WELL..... 35ft.
 WELL'S STATIC WATER LEVEL..... 31ft. 31' to Water

WELL WAS USED AS:

<input checked="" type="radio"/> 1 Domestic	5 Public Water Supply	9 Dewatering
<input type="radio"/> 2 Irrigation	6 Oil Field Water Supply	10 Monitoring Well
<input type="radio"/> 3 Feedlot	7 Lawn and Garden Only	11 Injection Well
<input type="radio"/> 4 Industrial	8 Air Conditioning	12 Other.....

Was a chemical/bacteriological sample submitted to Department? Yes....No.
 If yes, mo/day/yr sample was submitted.....
 Water Well Disinfected: Yes No.....

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	Hand dug

Blank casing diameter..... 3.6in. Was casing pulled? Yes No..... If yes, how much..... 4 1/2
 Casing height above or below land surface..... 54in.

6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other.....

Grout Plug Intervals: From 4 1/2 ft. to 4 ft., From.....ft. toft., From..... to.....ft.

What is the nearest source of possible contamination:

<input checked="" type="radio"/> 3 Watertight sewer lines	6 Seepage pit	11 Fuel storage	16 Other (specify below)
2 Sewer lines	7 Pit privy	12 Fertilizer storage	
4 Lateral lines	8 Sewage lagoon	13 Insecticide storage	
5 Cess Pool	9 Feedyard	14 Abandoned water well	
	10 Livestock pens	15 Oil well/Gas well	

Direction from well? West How many feet? 250

FROM	TO	PLUGGING MATERIALS
35	31	Chlorinated Sand
31	4 1/2	Clay Soil
4 1/2	4	Bentonite Plug
4	0	Topsoil

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 06/05/98 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. landowner. This Water Well Record was completed on (mo/day/year) 06/05/98 under the business name of Washington Construction, Inc. by (signature) Marlene Harmon, W.C. Coordinator

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, Topeka, Kansas 66620-0001. Telephone: 913/296-3565. Send one to Water Well Owner and retain one for your records.