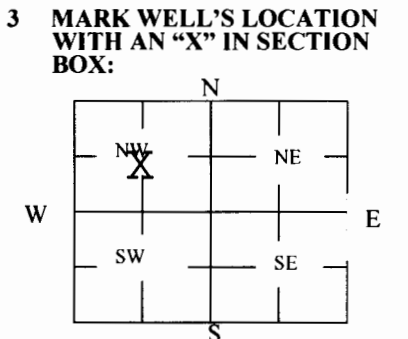


1 LOCATION OF WATER WELL: County: Pottawatomie Fraction 1/4 1/4 NW 1/4 1/4 Section Number 31 Township Number T 9 S Range Number 11 E W

Street/Rural Address of Well Location: if unknown, distance & direction from nearest town or intersection: If at owner's address, check here
16795 Say Rd, Wamego, KS 66547

2 WATER WELL OWNER: U.S. Army Corps of Eng.
 RR#, St. Address, Box #: 601 East 12th ST
 City, State ZIP Code: Kansas City, MO 64106

Global Positioning Systems (GPS) information:
 Latitude: 39.223611 (in decimal degrees)
 Longitude: 96.324654 (in decimal degrees)
 Elevation: 1100.23
 Datum: WGS84, NAD83, NAD27
 Collection Method:
 GPS unit (Make/Model: iPhone 5C)
 Digital Map/Photo, Topographic Map, Land Survey
 Est. Accuracy: < 3 m, 3-5 m, 5-15 m, > 15 m



4 DEPTH OF WELL 103 **ft.**
 WELL'S STATIC WATER LEVEL 89 **ft**
 WELL WAS USED AS:
 Domestic Public Water Supply Dewatering
 Irrigation Oil Field Water Supply Monitoring
 Feedlot Domestic (Lawn & Garden) Injection Well
 Industrial Air Conditioning Other ISCO
 Was a chemical/bacteriological sample submitted to Department? Yes No

5 TYPE OF BLANK CASING USED:

Steel RMP (SR) Wrought Fiberglass Other (Specify below)
 PVC ABS Asbestos-Cement Concrete Tile

Blank casing diameter 4 in. Was casing pulled? Yes No If yes, how much _____
 Casing height above or below land surface 30 in.

6 GROUT PLUG MATERIAL: Neat cement Cement grout Bentonite Other _____

Grout Plug Intervals: From _____ ft. to _____ ft., From _____ ft. to _____ ft., From _____ to _____ ft.

What is the nearest source of possible contamination:
 Septic tank Seepage pit Fuel Storage Other (specify below)
 Sewer lines Pit privy Fertilizer storage Unknown
 Watertight sewer lines Sewage lagoon Insecticide storage
 Lateral lines Feedyard Abandoned water well Direction from well? _____
 Cess pool Livestock pens Oil well/Gas well How many feet? _____

FROM	TO	PLUGGING MATERIALS	FROM	TO	PLUGGING MATERIALS
0	103	Neat Cement			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 10-30-14 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 597. This Water Well Record was completed on (mo/day/year) 10-30-14 under the business name of Cascade Drilling, L.P. by (signature) [Signature]

INSTRUCTIONS: Use typewriter or ballpoint pen. Please press firmly and print clearly. Please fill in blanks, underline or circle the correct answers. Send one copy to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Ste. 420, Topeka, Kansas 66612-1367. Telephone: 785/296-5524. Send one to Water Well Owner and retain one for your records. Visit us at <http://www.kdheks.gov/waterwell/index.html>.