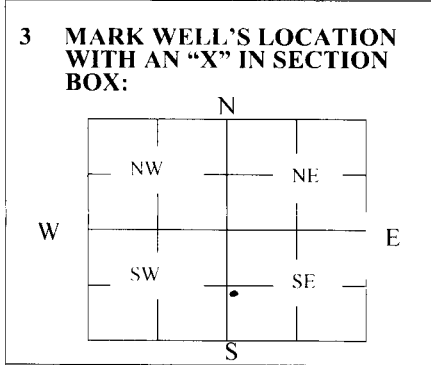


1 LOCATION OF WATER WELL: County: REPUBLIC	Fraction NW ¼ NW ¼ SW ¼ SE ¼	Section Number 2	Township Number T 1 S	Range Number 3 <input type="checkbox"/> E <input checked="" type="checkbox"/> W
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Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here FROM THE INTESECTION OF BIRCH . ROAD AND HWY 81 TRAVEL WEST FOR APPROX 2420 FT THEN NORTH FOR APPROX 1204 FT

Global Positioning Systems (GPS) information:
 Latitude: 39.989664 (in decimal degrees)
 Longitude: 97.621937 (in decimal degrees)
 Elevation: 1607
 Horizontal Datum: WGS84, NAD83, NAD27
 Collection Method:
 GPS unit (Make/Model: GARMIN
 Digital Map/Photo. Topographic Map. Land Survey
 Est. Accuracy: < 3 m. 3-5 m. 5-15 m. > 15 m

2 WATER WELL OWNER: CITY OF BELLEVILLE
 RR#, St. Address, Box #: 1819 L STREET
 City, State ZIP Code: BELLEVILLE, KS 66935



4 DEPTH OF WELL 198 ft.
 WELL'S STATIC WATER LEVEL 121 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 TESTING
 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 2.375 in. Was casing pulled? Yes No If yes, how much _____
 Casing height above or below land surface 48 in.

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

Grout Plug Intervals: From 5 ft. to 35 ft., From _____ ft. to _____ ft., From _____ ft. 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
 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	4	TOP SOIL			
4	5	CONCRETE CAP			
5	35	3/8" BENTONITE CHIPS			
35	<u>198</u>	ICE CONTROL GRAVEL			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 11/05/2019 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 480. This Water Well Record was completed on (mo/day/year) 11/20/2019 under the business name of WILLIAMS DRILLING CO INC by (signature) [Signature]

Send one white copy to Kansas Department of Health & Environment, Geology Section, 1000 SW Jackson Street, Ste. 420. Topeka, KS 66612-1367. Send one copy to WATER WELL OWNER and retain one for your records.
 Visit us at www.wellnet.org Telephone 785-296-5524.