163	3 6468		WATER WELL PLUGGING RECORD				WWC-5P K	2 1	ID NO.					
I LO	I LOCATION OF WATER WELL:			Fraction			Number	Town	Township Number		Range Number			
County:	Pawr	nee	NW	1/4 SE 1/	4 NW 1/4		11	Т	22	S	R	15	E (w)	
Distance	and direction fro	m nearest towr	n or city street address of well if located				in city?							
Appro	ximately 1 1/4	miles south	and 2	3/4 miles	west of Ra	ıdium								
2 WA	TER WELL OWNE	R: Nancy I	Branst	etter									•	
	RR#, St. Address, Box # 18230 County Road 1000 Board of Agriculture, Division of Water Resources City, State, ZIP Code St. James, MO 65559 Application Number: 3,425													
101	ARK WELL'S LOCA		4	DEPTH O	F WELL	94	ft							
}	N			WELL'S S	TATIC WATER	R LEVEL	35 ft.							
				WELL WA	S USED AS:									
<u> </u>	_ N.W	NE		1 Domesti	c ·		olic Water Suppl			9 Dewate	_			
	- и <u>х</u>		<	2 Irrigation	シ	6 Oil	Field Water Sup	pply		10 Monito	ring '	Veli		
w			E	3 Feedlot		7 Do	mestic (Lawn &	Garden)		11 Injection	n We	#I	,	
			-	4 Industria	al	8 Air	Conditioning			12 Other				
	S W S E Was a chemical / bacteriological sample submitted to Department?Yes No V										<b></b>			
	If yes, mo/day/yr sample was submitted													
	S Water Well Disinfected: Yes No													
5 TY	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 16 in. Was casing pulled? Yes No V If yes, how much Cut off  Casing height above or below land surface 48 in.														
6 GROUT PLUG MATERIAL: 1 Neat Cement 2 Cement grout 3 Bentonite 4 Other														
⊢ Gr	out Plug Interval	s: From	35	ft. to	4 ft.	, From	ft.	to	ft.	From		ft. to	ft.	
	hat is the neares	•							_					
	1 Septic tank					Fuel storage				16 Other (specify below)				
	2 Sewer lines		7 Pit pi			l2 Fertilize	<del>-</del>	Non	one known					
	Watertight sewe					inscende storage				5 Kilowii				
	Lateral lines Cess Pool		- · · · · · · · · · · · · · · · · · · ·				indoned water well vell/Gas well							
Direction from well? How many feet?														
FROM TO PLUGGING MATERIALS														
9	94 35	Chlorinate	ed Sar	nd										
3	35 4 Concrete Gro													
	4 0 Compacted													
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed												pleted		
on (mo/day/year) 3-27-03 and this record is true to the best of my knowledge and belief. Kansas														
Water Well Contractor's License No. 185 This Water Well Record was completed on (mo/day/year)												//year)		
3-	-28-03	un <del>d</del> er tl	he busi	ness name	of Clarke	e Well &	Equipment, I	nc.						

INSTRUCTIONS: Use typewriter or ball point pen. <u>Please press firmly</u> and <u>print</u> clearly. Please fill in blanks, underline or circle the correct answers. Send top three copies to Kansas Department of Health & Environment, Bureau of Water, Topeka, Kansas 66620-0001. Telephone: 785/296-3565. Send one to Water Well Owner and retain one for your records.

by (signature)