302 8144			WATER WELL PLUGGING RECO			D Form WWC-5P	82a-1212	ID NO.		DW-TW8A			
I LOCATION OF WATER WELL:			Fraction			Section * Number		Township Numb			Range	Number	
County: Harvey			NW	1/4 SW 1/4 N	IW 1/4	8		т	23	s R	2	E (w)	
				street address of					23	-		$\overline{}$	
1				miles north of		-							
	WELL OWNER	D.											
RR#, S		burns 8 0x # 9400 W	& McDonnell Vard Parkway s City, MO 64114			Board of Agriculture, Division of Water Resources Application Number:							
•	WELL'S LOCA		4	DEPTH OF WE	ELL	115.1	ft						
w x	"IN SECTION N I W S	BOX:	lf	WELL'S STATION WELL WAS USE 1 Domestic 2 Irrigation 3 Feedlot 4 Industrial Vas a chemical / yes, mo/day/yes	C WATER I ED AS: bacterio r sample	5 Public Water S 6 Oil Field Water 7 Domestic (Law 8 Air Conditionin logical sample sub was submitted	ft. Supply Supply on & Ga g comittee	arden) d to Depar	9 Dew 10 Mo 11 Inje 12 Ott	nitoring ction W	y Well	> 	
5 TYPE	OF BLANK CA	SING LISED:											
1 1	Steel	3 RMP (SI	R)	5 Wrought		7 Fiberglass		9	Other (Spe	cify bel	ow)		
l	PVC	4 ABS	• • •	•	ment		e		, ,	•	•		
	casing diame		in.	Was easing	nullod?	Voc	No.	_ /	If you how				
ı				land surface	48	8 Concrete Tile Yesin.	NO	. Y	ii yes, now	muci	,		
	T PLUG MAT					ut 3 Bentoni							
	Plug Interval												
	·			contamination:		Fromf	11. 10		it. Fiolii	····· ·	II. IO		
	eptic tank	•				1 Fuel storage			16 Other (specify below)				
i	ewer lines					2 Fertilizer storage			(4)				
1						3 Insecticide storage			None known				
	iteral lines					Abandoned water well							
5 Ce	ess Pool	1		stock pens	15	Oil well/Gas well							
Direc	ction from we	II?		Hov	w many fe	eet?							
FROM	то	F	LUGGII	NG MATERIALS									
115.1	30	Chlorinate	ad San	ıd									
4	0	Compacte	ea Soil										
					<u> </u>								
CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 10-24-06 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)													
11-01-06 under the business name of Clarke Well & Equipment, Inc.												•	
by (signature)													
						mly and print clear						the correct	
answers.	Send top thre	ee copies to I	Kansas	Department of	Health &	Environment, Bure ain one for your re-	eau of	Water, To	peka, Kan	sas 66	3620-000	1.	