WATER WELL PLUGGING R	RECORD Form WV	VC-5P	KSA 82	a-1212 ID NO.	0046268	
1 LOCATION OF WATER WELL:	Fraction	Section	Number	Township Number	Range Number	
County: Pottawatomie				T 10 S	12 7 E W	
Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, Global Positioning Systems (GPS) information: Latitude:(in decimal degrees)						
check here Cin decimal degrees						
Elevation: Datum: WGS84, NAD83, NAD27					NAD27	
103 W. Bertrand, St. Marys Collection Method:					L NADZI	
2 WATER WELL OWNER: L.C. McClain, Inc.			GPS unit (Make/Model:			
RR#, St. Address, Box #: P.O. Box 218			☐ Digital Map/Photo, ☐ Topographic Map, ☐ Land Survey			
City, State ZIP Code: Rossville, KS 66533 Est. Accuracy: \square <3 m, \square 3-5 m, \square 5-15 m, \square > 15 m						
MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX: N						
Steel RMP (SR) Wrought Fiberglass Other (Specify below) PVC ABS Concrete Tile Blank casing diameter 2 in. Was casing pulled? Yes No lf yes, how much ~3ft below ground surface						
Casing height above or below land surfacein.						
6 GROUT PLUG MATERIAL: Neat cement Cement grout Bentonite Other						
Grout Plug Intervals: From 3 ft. to 37.5 ft., From ft. to ft., From to ft.						
What is the nearest source of possible contamination: Septic tank Seepage pit Pit privy Fertilizer storage Watertight sewer lines Lateral lines Feedyard Cess pool Seepage pit Fuel Storage Fertilizer storage Insecticide storage Abandoned water well Oil well/Gas well How many feet?						
	GING MATERIALS	FROM	ТО	PLUGGING	MATERIALS	
3 37.5 Bentonite	·					
	The state of the s			ASW-3		
	100					
			-			
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 5/7/2014 and this record is true to the best of my knowledge and belief. K ansas Water Well Contractor's License No. This Water Well Record was completed on (mo/day/year) 5/21/2014 under the business name of GreenField Contractors, Inc. by (signature) Melioa D. Millian.						
INSTRUCTIONS: Use typewriter or b	allnoint nen Please press fi	rmly and pri	nt clearly	Please fill in blanks	underline or circle the	
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.						