Form WWC-5P

KSA 82a-1212

ID NO. UAKAOUA

1 LOC	ATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: \	Mandotte	NE14 NG 14 NE 14	3 2	10	2.4 Am
Distance and direction from nearest town or city street address of well if located within city?					
7525 Leavenuotth RD. Kansas eity Kansas					
2 WAT	ER WELL OWNER:	R Anto	,		
	ou riddiood, box ii.	is City to	Board of Agriculture Application Number	, Division of Water Resource:	ces
	RK WELL'S LOCATION WITH	4 DEPTH OF WELL	3.5 n.	,1,00	
	N	WELL'S STATIC WATE	R LEVEL ft.		
.	x				
r	NE NE	1 Domestic 2 Irrigation	5 Public Water Supply6 Oil Field Water Supp	Dewateri Iy Monitorir	
w	Е	3 Feedlot	7 Domestic (Lawn & G	arden) 11 Injection	Well
"		4 Industrial	8 Air Conditioning	12 Other	
SW SE Was a chemical / bacteriological sample submitted to Department? Yes					
`		If yes, mo/day/yr sample wa	as submitted	•••••	
L	S	Water Well Disinfected: Ye	es		
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					
2					
	ing height above or below land su	Was caring pulled?	in.	If yes, now mu	cn
0	-	eat cement 2 Cement grown 2.5. ft. to ft.		Other	
•					
What is the nearest source of possible contamination:					
1 Septic tank 6 Seepage pit 2 Sewer lines 7 Pit privy			Fuel storage 12 Fertilizer storage	16 Other (spe	
3 Watertight sewer lines 8 Sewage lagoon			13 Insecticide storage	المد	
4 Lateral lines 9 Feedyard 14 Abandoned water well 5 Cess pool 10 Livestock pens 15 Oil well/Gas well					
Direction from well? Ca) + How many feet? 40					
FROM TO PLUGGING MATERIALS					
2.5' 4.5' Bentonite 4.5' 35' Cement Grout					
4.5	35' comen	t Grout			
\					
<u></u>					
7 CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on					
(mo/day/year) and this record is true to the best of my knowledge and belief. Kansas					
(mo/day/year)					
by (s	ignature) Javid H	reg yn			
INSTRUC	TIONS: Use typewriter or ball	point pen. Please press firr	nly and print clearly. Pleas	se fill in blanks, underling	e or circle the correct
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 and Environment, Bureau of Water, Geology Section, 1000 SW Jackson					

St., Ste. 420, Topeka, Kansas 66612-1367. Telephone: 785/296-5522. Send one to Water Well Owner and retain one for your records.