WATER WELL PLUGGING RECORI) Form WW	/С- 5 Р к	ISA 82a-1212	ID NO.	63P
1 LOCATION OF WATER WELL: Fraction	W 1/4 SW 1/4 NE	Section Nur	mber Town	ship Number IO S	Range Number
Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here ch					
2 WATER WELL OWNER: Fairfax Drainage District RR#, St. Address, Box #: 1620 Fairfax Trafficway City, State ZIP Code: Kansas City, KS 66115 Contected Tricals GPS unit (Make/Model: Trimble GeoXT 2008 Series Digital Map/Photo,					Iap,
3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX: N					
S 5 TYPE OF BLANK CASING USED:					
Steel RMP (SR)					
FROM TO PLUGGING M	ATERIALS	FROM	ТО	PLUGGING	G MATERIALS
25.00 47.00 Cement Grout 47.00 91.80 Chlorinated Silica S	and				
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 02 14 2011 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. This Water Well Record was completed on (mo/day/year) 04/16/2012 under the business name of Fairfax Drainage District by (signature) Stephen Alice P. E.					
INSTRUCTIONS: Use typewriter or ballpoint pen. Please press firmly and print 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: 785/296-5524. Send one to Water Well Owner and retain one for your records. Visit us at http://www.kdheks.gov/waterwell/index.html.					
Check one: White Copy Blue Copy Pink Copy					