W	ATER WELL PLUGGING	RECORD Form WV	VC-5P KS	SA 82a-1212	ID NO.	131 P
1	LOCATION OF WATER WELL:	Fraction	Section Num	ber Township	Number	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 Collection Method: □ GPS unit (Make/Model: Trimble GeoXT 2008 Series □ Digital Map/Photo, □ Topographic Map, □ Land Survey □ Land Survey □ St. Accuracy: □ <3 m, □ 3-5 m, □ 5-15 m, □ >15 m					
3	MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX: 4 DEPTH OF WELL 102.56 ft. WELL'S STATIC WATER LEVEL 24.6 ft					
W	WELL WAS USED AS: NW					
5	TYPE OF BLANK CASING USED:					
6	Steel RMP (SR) Asbestos-Cement Fiberglass Other (Specify below)					
	Lateral lines Cess pool Ce					
		GGING MATERIALS	FROM 7	TO P	LUGGING	MATERIALS
		ed Silica Sand				
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 3/11/2011 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) 5type 10/2012.						
INSTRUCTIONS: Use typewriter or ballpoint pen. Please press firmly and print clearly. Please fill in blanks, under ine 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						