WATER WELL PLUGGING F	RECORD Form WW	/C-5P KSA 82	a-1212 ID NO.	37 P
1 LOCATION OF WATER WELL: County: Wyandotte	Fraction NE 14 SE 14 SE 14 NW	Section Number	Township Number T 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				
WATER WELL OWNER: Fairfax Drainage District GPS unit (Make/Model: Trimble GeoXT 2008 Series Digital Map/Photo, □ Topographic Map, □ Land Survey City, State ZIP Code: Kansas City, KS 66115 Est. Accuracy: ✓ 3 m, □ 3-5 m, □ 5-15 m, □ > 15 m				
MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX: N WELL'S STATIC WATER LEVEL 23.8 ft WELL WAS USED AS: Domestic Dewatering				
W SW SE E Irrigation Feedlot Domestic (Lawn & Garden) Injection Well Air Conditioning Other Relief Well Was a chemical/bacteriological sample submitted to Department? Yes No				
5 TYPE OF BLANK CASING USED:				
Steel RMP (SR) Wrought Fiberglass Other (Specify below) PVC ABS Concrete Tile				
Blank casing diameter in. Was casing pulled? Yes No If yes, how much Casing height above or below land surface (14.13) in ft				
6 GROUT PLUG MATERIAL: Neat cement Cement grout Bentonite Other				
Grout Plug Intervals: From 14.13 ft. to 34.83 ft., From ft. to ft., From to ft.				
What is the nearest source of possible contamination: Septic tank Sewer lines Pit privy Watertight sewer lines Lateral lines Fuel Storage Fertilizer storage Insecticide storage Abandoned water well Direction from well?				
Cess pool Livestock pens Oil well/Gas well How many feet? 3100				
	GGING MATERIALS	FROM TO	PLUGGINC	MATERIALS
	d Silica Sand			
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 2/21/2011 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 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)				
INSTRUCTIONS: Use typewriter or ballpoint pen. Please press firmly and print clearly. Please fill in blanks, underling 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.				
L		Check one:	White Copy B	lue Copy Pink Copy