89 W			ell No. 29 GGING F	ECORD	Form WW	C-5P	KSA 82	a-1212 ID I	NO. [20110168	
	OCATION O County:		R WELL:	Fraction	4 SE 1/4 NW1/	Section	Number 27	Township Nur T 10	mber	Range Number 7 🕅 E 🕅 W	
	Street/Rural A direction from check here	ddress of W nearest tow]	Vell Location; vn or intersect	if unknown, di ion: If at owne	Global Po Latitude: Longitude	Global Positioning Systems (GPS) information: Latitude: 39.155016 Longitude: -96.637955 Elevation: unknown					
Ap 	proximately	3 miles s	outhwest o	f Manhattan	•	Datum: Collection	Datum: WGS84, NAD83, NAD27 Collection Method:				
2	WATER WI RR#, St. Add City, State Z	۲ ۳. 4421 ۲	at Construct W. Harry a, KS 6727		GPS unit (Make/Model: WAAS Digital Map/Photo, Topographic Map, Land Survey Est. Accuracy: < 3 m,						
3	3 MARK WELL'S LOCATION 4 DEPTH OF WELL <u>40</u> ft.										
	BOX:	N IN SE	CHON	WELL'	WELL'S STATIC WATER LEVEL <u>19</u> ft						
	NW SW-	NE	E	☐ Dom ☐ Irrig ☐ Feed ☐ Indu	ation llot Istrial	S: Public Water Supply Dewatering Oil Field Water Supply Monitoring Domestic (Lawn & Garden) Injection Well Air Conditioning Other ological sample submitted to Department? Yes No X					
5	S TYPE OF BLANK CASING USED:										
	Steel RMP (SR) Wrought Fiberglass Other (Specify below) PVC ABS Asbestos-Cement Concrete Tile										
6	GROUT PLUG MATERIAL: Neat cement Cement grout Bentonite Other Grout Plug Intervals: Fromft. toft., Fromft. toft. Fromtoft.										
	What is the nearest source of possible contamination: Septic tank Seepage pit Sewer lines Pit privy Watertight sewer lines Sewage lagoon Lateral lines Feedyard Cess pool Livestock pens										
	FROM 0	TO 18	PLUC Bentonite	GING MATI	ERIALS	FROM	TO	PLUG	GING M	IATERIALS	
	18	40			back caved in						
	-							-			
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 12/05/11 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 185 This Water Well Record was completed on (mo/day/year) 12/08/11 under the business name of											
cor Jacl	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 <u>http://www.kdheks.gov/waterwell/l~ndex.html.</u>										

Check one:

White Copy Blue Copy Pink Copy