79 W		Well N		D Form WW	'C-5P	KSA 82	a-1212 ID NO.	20110168
		DF WATER WE Riley	LL: Fraction		Section	Number 27	Township Number T 10 S	Range Number 7 $\boxtimes E \square W$
	Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here Global Positioning Systems (GPS) information: Latitude: 39.153875 (in decimal decim							
Collection Method:								NAD27
2		ELL OWNER: dress, Box #:	Wildcat Const 4421 W. Harr Wichita, KS 6	/	GPS unit (Make/Model:WAASDigital Map/Photo,Topographic Map,Land SurveyEst. Accuracy: $< 3 \text{ m}$, $\boxed{3-5 \text{ m}}$, $5-15 \text{ m}$, $> 15 \text{ m}$			
3	MARK WE WITH AN ' BOX:	LL'S LOCATI 'X'' IN SECTIO N		WELL'S STATIC WATER LEVEL 17.65 ft				
	WSW	VNE		WELL WAS USED AS: Domestic Public Water Supply Irrigation Oil Field Water Supply Feedlot Domestic (Lawn & Garden) Industrial Air Conditioning Was a chemical/bacteriological sample submitted to Department? Yes N				ion Well
5	TYPE OF BLANK CASING USED:							
	SteelRMP (SR)WroughtFiberglassOther (Specify below)PVCABSAsbestos-CementConcrete Tile							
	Blank casing diameter <u>8</u> in. Was casing pulled? Yes No If yes, how much <u>40'</u> Casing height above or below land surface. <u>in.</u>							
6	GROUT PLUG MATERIAL:							
	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	TO	PLUGGING N	IATERIALS	FROM	TO	PLUGGING	MATERIALS
	0 17		ntonite Chips sting grout and	well pack 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 Clarke Well & Equipment, Inc. by (signature)								
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