9 W			/ell No. 42 GGING F	RECORD	Form WW	'C-5P	KSA 82	a-1212	ID NO.	20110168	
	OCATION County:		R WELL:	Fraction	4 SW 1/4 NW1/4	Section	Number 27		p Number 10 S	Range Number 7 🛛 E 🗌 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:  39.153107  (in decimal degree in the complete in the complet										ation: (in decimal degrees) (in decimal degrees)	
Approximately 3 miles southwest of Manhattan.									NAD83,	NAD27	
2	WATER W RR#, St. A City, State	ion 7	GPS unit (Make/Model:WAASDigital Map/Photo,Topographic Map,Land SurveyEst. Accuracy: $< 3 m$ , $\boxtimes 3-5 m$ , $5-15 m$ , $> 15 m$								
3	MARK WI WITH AN BOX:	"X" IN SE			H OF WELL _ S STATIC WA	<u>40</u> <u>ft.</u> TER LEVEL <u>16.35</u> <u>ft</u>					
	WELL WAS USED AS:										
	WNWNE SWSE 			☐ Irrig ☐ Fee ☐ Indu	☐ Irrigation ☐ Oil ☐ Feedlot ☐ Doi ☐ Industrial ☐ Air			Public Water Supply  Image: Constraint of the second se			
	S										
5	TYPE OF BLANK CASING USED:    Steel  RMP (SR)  Wrought  Fiberglass  Other (Specify below)    PVC  ABS  Asbestos-Cement  Concrete Tile										
6	GROUT PLUG MATERIAL: A Neat cement Cement grout Bentonite Other										
	Grout Plug Intervals: Fromft. toft., From0 ft. toft., Fromtoft.										
	What is the nearest source of possible contamination:    Septic tank  Seepage pit    Sewer lines  Pit privy    Hatertight sewer lines  Sewage lagoon    Lateral lines  Feedyard    Cess pool  Livestock pens										
	FROM	ТО	PLUC	GING MAT	ERIALS	FROM	TO	Р	LUGGING	MATERIALS	
	0	<u>17</u> 40	Bentonite	•	nack asved in						
	17	40		out and wen	pack caved in						
								<u> </u>			
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year)    12/06/11  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)											
<b>INSTRUCTIONS:</b> 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											