76 W /			ell No. 4 G <mark>GING R</mark>	ECORD	Form WW	C-5P	KSA 82	a-1212 ID NO.	20110168
	OCATION OF	F WATE	R WELL:	Fraction	4 NW 1/4 SW 1/4	Section	Number	Township Number T 10 S	Range Number 7 X E W
Ар	County: Street/Rural Ad direction from a check here	nearest tow	ell Location; on or intersect	if unknown, di tion: If at owne	stance & r's address,	4  27  T  10  S  7  X  E  W    Global Positioning Systems (GPS) information:    Latitude:  39.152563  (in decimal degrees)    Longitude:  -96.64321  (in decimal degrees)    Elevation:  unknown    Datum:  WGS84,  NAD83,  NAD27			
2	WATER WELL OWNER: Wildcat Construction RR#, St. Address, Box #: City, State ZIP Code: Wichita, KS 67277					Collection Method:  WAAS    □ Digital Map/Photo,  □ Topographic Map,  □ Land Survey    Est. Accuracy:  □ < 3 m,  ⊠ 3-5 m,  □ 5-15 m,  □ > 15 m			
3	MARK WELL'S LOCATION WITH AN ''X'' IN SECTION BOX: N WELL'S STATIC WA WELL WAS USED A					TER LEVEL <u>16.75</u> ft .S:			
	W NE  Domestic  Public Water Supply  Dewatering    W NE  Irrigation  Oil Field Water Supply  Monitoring   SW SE  Feedlot  Domestic (Lawn & Garden)  Injection Well    Was a chemical/bacteriological sample submitted to Department? Yes  No X								toring ion Well
_	S TYPE OF BLANK CASING USED:								
5	Image: Steel in the second content of the second content								
6	GROUT PLUG MATERIAL: Neat cement Cement grout Bentonite Other Grout Plug Intervals: Fromft. toft., From0ft. 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	TO		GGING MAT	ERIALS	FROM	TO	PLUGGING	MATERIALS
	0 13	13 40	Bentonite Existing gr		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)    12/06/11  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    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									