78 10872 Well No. 8 WATER WELL PLUGGING F	RECORD Form WW	C-5P KSA 82	a-1212 ID NO.	20110168
1 LOCATION OF WATER WELL:	Fraction 1/4 NW 1/4 NW 1/4 SW 1/4	Section Number	Township Number T 10 S	Range Number 7 ⊠ E □ W
County: Riley  Street/Rural Address of Well Location; direction from nearest town or intersect check here  Approximately 3 miles southwest of	Clobal Positioning Systems (GPS) information:   Latitude: 39.152849 (in decimal degrees)     Longitude: -96.642622 (in decimal degrees)     Elevation: Unknown     Datum: WGS84, NAD83, NAD27			
2 WATER WELL OWNER: Wildcat Construction RR#, St. Address, Box #: City, State ZIP Code: Wildcat Construction 4421 W. Harry Wichita, KS 67277		Collection Method:  ☐ GPS unit (Make/Model: WAAS ☐ Digital Map/Photo, ☐ Topographic Map, ☐ Land Survey ☐ 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				
W X  NE-   E   Domestic   Public Water Supply   Dewatering   Monitoring   Monitoring   Monitoring   Domestic (Lawn & Garden)   Injection Well   Industrial   Air Conditioning   Other   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 Asbestos-Cement Concrete Tile  Plank casing diameter 8 in Was casing pulled? Yes No If yes how much 40'				
Blank casing diameter 8 in. Was casing pulled? Yes No If yes, how much 40'  Casing height above or below land surface. in.				
6 GROUT PLUG MATERIAL: Neat cement Cement grout Bentonite Other				
Grout Plug Intervals: From ft. to ft., From 0 _ ft. to ft., From to ft.				
What is the nearest source of possible contamination:  Septic tank Seepage pit Fuel Storage None Known  Sewer lines Sewage lagoon Insecticide storage Lateral lines Feedyard Abandoned water well Cess pool Livestock pens Oil well/Gas well How many feet?				
1 - 1 - 1	GGING MATERIALS	FROM TO	PLUGGING	MATERIALS
0 15 Bentonite 15 40 Existing gr	out 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) 12/06/11 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)				
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 <a href="http://www.kdheks.gov/waterwell/l~ndex.html">http://www.kdheks.gov/waterwell/l~ndex.html</a> .				
Check one: White Copy Blue Copy Pink Copy				