WATER WE	WATER WELL PLUGGING RECORD Form WWC-5P KSA 82a-1212 ID NO.						
1 LOCATION County:	OF WATER WELL:	Fraction SE 1/4 N	E1/4 Section	on Number	Township Number	Range Number	
Distance and direction from nearest town or city street address of well if located within city?							
5 m. East of Manhattan Ks							
2 WATER WELL OWNER: MODIL CREEK CORP- RR#, St. Address, Box #: 611 W. 3 P. Global Positioning Systems (decimal degrees, min. of 4 digits Latitude: Longitude: Elevation:							
RR#, St. Address, Box #: 611 W. 3 kp			Longitud Elevatio	Longitude:			
City, State ZIP Code:				Datum			
3 MARK WELL'S LOCATION 4 DEPTH OF WELL 45 ft.							
	X" IN SECTION						
BOX: WELL'S STATIC WATER LEVEL 13 ft							
	well was used as:						
- NW	NE NE	1 Domestic	5 Public	Water Supply	9 <u>De</u> wa	tering	
		2 Irrigation	6 Oil F	ield Water Sup	ply 10 Moni		
W	E	3 Feedlot		7 Domestic (Lawn & Garden) 11 Injection Well			
SW SE 4 Industrial 8 Air Conditioning 12 Other							
Was a chemical/bacteriological sample submitted to Department? Yes No 🔀							
S 5 TYPE OF BLANK CASING USED:							
1 Steel 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (Specify below)							
2 PVC 4 ABS 6 Asbestos-Cement 8 Concrete Tile							
Blank casing diameter in. Was casing pulled? Yes No If yes, how much Casing height above or below land surface in.							
Casing heigh	nt above or below land su	irface 60 in.					
6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other Grout Plug Intervals: From ft. to ft., From ft. to ft., From to ft. What is the nearest source of possible contamination: 1 Septic tank 6 Seepage pit 11 Fuel Storage 16 Other (specify below) 2 Sewer lines 7 Pit privy 12 Fertilizer storage							
3 Watertight sewer lines 8 Sewage laggon 13 Insecticide storage							
4 Lateral lines 9 Feedyard 14 Abandoned water well Direction from well?							
5 Cess pool 10 Livestock pens 15 Oil well/Gas well How many feet? 4044							
FROM		ING MATERIALS	FROM	TO	PLUGGING MA	TERIALS	
	5 100 5	01					
5 4	GONCI	26-6-					
	/	•					
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was							
completed on (mo/day/year) and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No This Water Well Record was completed on (mo/day/year) under the							
		- 1 - 1		· ./\A . '	6	under the	
business name of	PETERSON-	TRRIGATION	by (signat	iuic)	w Settino		
INSTRUCTION	S: Use typewriter or bal	lpoint pen. Please press	firmly and pri	nt clearly. Plea	ase fill in blanks, unde	erline or circle the	
correct answers.	Send top three copies to	Kansas Department of H	ealth and Envi	ronment, Bure	au of Water, Geology	Section, 1000 SW	
Jackson St., Ste.	420, Topeka, Kansas 666	12-1367. Telephone: 78					
records. Visit us at http://www.kdheks.gov/geo/waterwells.							