			WATER WELL PLUGGING F	RECORD Form WWC-5P	KSA 82a-1212 ID	NO. MW3	
1 LO	CATION OF WAT	ER WELL:	Fraction	Section Number	Township Number	Range Number	
County: WVANDOTTE			1/4 1/4 1/4 1/4 1/4 1/4 1/4 1/4 1/4 1/4	3	11	74 Am	
	and direction from	nearest town or	r city street address of well if loa	cated within city?		1 04 19.11	
450	3 PARAUL	. ha. 🗸		/			
2 W/	TER WELL OWN	ER: Stffe	ey' F. Armyteun't	•			
	#, St. Address, Bo , State, ZIP Code		OX 17177 AS CITY KANSAS GUI	Board of Agricultur Application Number	re, Division of Water Resou er:	rces	
3 MA	ARK WELL'S LOC	,	11 1 1 1	4 DEPTH OF WELL			
	I "X" IN SECTION N		WELL'S STATIC WAT	ER LEVEL			
			WELL WAS USED AS	:			
	-NW	- NE	1 Domestic 2 Irrigation	<ul><li>5 Public Water Supply</li><li>6 Oil Field Water Sup</li></ul>			
w		E	3 Feedlot	7 Domestic (Lawn & 0	Garden) 11 Injection	n Well	
			, maaama	· ·		./	
	SW SE SE Was a chemical / bacteriological sample submitted to Department? Yes						
			Water Well Disinfected: Y	′es No			
	S						
5 TY	PE OF BLANK CA	ASING USED:					
	Steel 3 RM PVC 4 ABS	, ,	/rought 7 Fiberg sbestos-Cement 8 Concre		below)		
Bla	ank casing diamet		Was casing pulled?			uch	
	OUT PLUG MATE	-	Neat cement 2 Cement gro	1 VOCENCIL	Other		
1	out Plug Intervals:				to $0$ ft., From	to f	
Wh	at is the nearest s	source of possib	le contamination:	15 f 5	brilds -		
Septic tank     Sewer lines			6 Seepage pit 7 Pit privy	Fuel storage (Fluid		ecify below)	
<ul><li>3 Watertight sewer lines</li><li>4 Lateral lines</li></ul>			8 Sewage lagoon 9 Feedyard	13 Insecticide storag			
	5 Cess pool	A lum Ci	10 Livestock pens	15 Oil well/Gas well	Well		
Di	rection from well?	NURTH	How man	y feet?			
FROM TO PI		LUGGING MATERIALS			•		
0	1	CUNCRE	(t				
l	37		JITE CHIPS				
	/ <u></u>	1,000,000					
HE I							
7 CC	NTRACTOR'S	OF LANDOWA	WER'S CERTIFICATION: Thi	s water well was plugge	d under my jurisdiction	and was completed on	
(me	o/day/year) ter Well Contractor	r's License No	JER'S CERTIFICATION: Thi	and this record is tri And this record is tri	ue to the best of my know ater Well Record was con	ledge and belief. Kansas npleted on (mo/day/year)	
	(signature)	Mynder 1	he business name ofu.v	An sime sexuices,	1.10.0		

INSTRUCTIONS: Use typewriter or ball point pen. <u>Please press firmly</u> and <u>print</u> 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: 785/296-5522. Send one to Water Well Owner and retain one for your records.