		WATER WELL PLUGGING R	ECORD Form WWC-5P	KSA 82a-1212 ID N	10	
1 LOC	ATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number	
	Geary	SE 14 NW 14 SE 14	35	11 S	5E/W	
Distance an E. of 1	d direction from nearest town of the direction from the d	or city street address of well if loc y Water Plant	ated within city?			
2 WATI	ER WELL OWNER: Repub	lican River Industri	al Park			
RR #,	St. Address, Box #: P.O.	Box 1876 ion City, KS 66441		e, Division of Water Resour	ces	
I I	WELL'S LOCATION WITH	4 DEPTH OF WELL				
013.7	WELL'S STATIC WATER LEVEL					
		. ' WELL WAS USED AS:	· ·		·	
N	NE NE	1 Domestic 2 Irrigation	<ul><li>5 Public Water Supply</li><li>6 Oil Field Water Supp</li></ul>	9 Dewater  9 Monitorii		
14/		3 Feedlot	7 Domestic (Lawn & G	arden) 11 Injection	Well	
W		E 4 Industrial	8 Air Conditioning	12 Other		
Was a chemical / bacteriological sample submitted to Department? Yes						
		Water Well Disinfected: Ye	esX			
	S					
5 TYPE	OF BLANK CASING USED:				-	
2 Ste		Vrought 7 Fibergla sbestos-Cement 8 Concre		elow)  Drilled		
	casing diameter2 in. g height above or below land	Was casing pulled?	168	.X If yes, how mu	out to 18'	
6 GROL		Neat cement 2 Cement gro	ut Bentonite OC	Other Concrete		
	•		, Fromft. to	o	to ft	
	s the nearest source of possib					
	eptic tank ewer lines	6 Seepage pit 7 Pit privy	<ul><li>11 Fuel storage</li><li>12 Fertilizer storage</li></ul>	(16) Other (spe	acity below)	
3 V	atertight sewer lines	8 Sewage lagoon	13 Insecticide storage			
	ateral lines ess pool	9 Feedyard 10 Livestock pens	<ul><li>14 Abandoned water v</li><li>15 Oil well/Gas well</li></ul>	weil		
	on from well?		feet?			
FROM	TO F	LUGGING MATERIALS		•		
	<u> </u>	e (8")		•		
	2 Concret		WOBW-	-2		
2	/8 Bentoni	te (8")				
			KDHE	# 45 031 008	590	
			GC#1	201		
7 CONT	RACTOR'S OF LANDOWN	ER'S CERTIFICATION: This	water well was plugged	under my jurisdiction a	and was completed on	
(mo/da	y/year)	ER'S CERTIFICATION: This	and this record is true	e to the best of my knowle	edge and belief. Kansas	
1	veil Contractor's License No ./.25./.2005 under t	he business name ofGe	This Wa	ter Well Hecord was com	pleted on (mo/day/year)	
by (sig	nature)	527 he business name ofGe		••••••	***************************************	
INSTRUCTI	ONS: Use typewriter or ba	Il point pen. <u>Please press firm</u> nsas Department of Health a	nly and <u>print</u> clearly. Plea	se fill in blanks, underlin	e or circle the correct	

St., Ste. 420, Topeka, Kansas 66612-1367. Telephone: 785/296-5522. Send one to Water Well Owner and retain one for your records.