					WATER WELL PLUGGING R	ECORD	Form WWC-5P	KSA 82a-1	212 ID N	10. PZ	-B	
1	LOCAT	ION OF WAT	ER WELL:		Fraction	Section	Number	Township	Number	Range	Number	
Cou	inty:				SE 1/4 NW 1/4 5W 1/4	2	28		5	6	EλW	
		direction from	nearest town	or c	ity street address of well if loc							
			l	/A								
2	WATE	R WELL OWN	IER: US/	AX	emy Directorate	of E	WINON M	ent r S	Afety			
		t. Address, Bo te, ZIP Code)×#: 407 : F	4	Pershing Court	Boa /// App	rd of Agriculture	e, Division of W	/ater Resourc	es		
3	MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:				Pershins Court Board of Agriculture, Division of Water Resources Rile KS 66442 Application Number: 4 DEPTH OF WELL							
	N				WELL WAS USED AS:		(
w	NW NE			E	1 Domestic 2 Irrigation 3 Feedlot 4 Industrial	6 Oil F 7 Dom	5 Public Water Supply 6 Oil Field Water Supply 7 Domestic (Lawn & Garden) 8 Air Conditioning 9 Dewatering 10 Monitoring Well 11 Injection Well 12 Other					
				-	Was a chemical / bacteriological sample submitted to Department? Yes							
	S				Water Well Disinfected: Yes No							
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	casing diamet height above	ter3/4 i e or below lan	n. d su	Was casing pulled?		No	.k If	yes, how mu	ch		
6	GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other											
Grout Plug Intervals: From												
What is the nearest source of possible contamination:										-16 - 1 1 3		
1 Septic tank 2 Sewer lines					6 Seepage pit 7 Pit privy		40 = -111			16 Other (specify below)		
3 Watertight sewer lines					8 Sewage lagoon		13 Insecticide storage 14 Abandoned water well					
4 Lateral lines 5 Cess pool				9 Feedyard10 Livestock pens		15 Oil well/Gas well						
	Directi	on from well?			How many	feet?						
				-	JGGING MATERIALS							
<u> </u>	<i>C</i>)	3 Fill			unent Grant							
	3	9.1	Neat	<u>.</u>	unent Girst							
7	CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed (mo/day/year)										pleted on ef. Kansas	
	O	9/30/04	unde	r th	business name of	ACET	UWK - 1	=C-66				
	by (sig	nature)		s	John Ill	[N/]						
	STRUCTI	ONS: Use ty	ypewriter or	ball	point pen. <u>Please press fir</u> as Department of Health a	<u>mıy</u> ∕and <u>prir</u>	<u>it</u> clearly. Plea	se tili in bian	ks, unaeriin	e or circle th	ie correct	

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