WATER WELL PLUGGING RECORD

Form WWC-5P

KSA 82a-1212

IDNO. 00338293

1 L	OCATION OF WATE		Fraction	Section Number	Township N	Number	Range Number	
County: DOUGLAS		NEW SEW SWW	19	125		20 E		
Distance and direction from nearest town or city street address of well if located within city?								
1001 North 3 de St. Lawrence, KS.								
2 WATER WELLOWNER: HERB BEHLOW								
	RR #, St. Address, Box #: City, State, ZIP Code : Lawrence, Kansas Board of Agriculture, Division of Water Resources Application Number:							
	MARK WELL'S LOCA			23 <i>.80</i> n				
	WELL'S STATIC WATER LEVEL 9,65. ft.							
	T Î		WELL WAS USED AS:					
_	_ N W	N E	1 Domestic 5 Public Water Supply 9 Dewatering 2 Irrigation 6 Oil Field Water Supply 10 Monitoring Well 3 Feedlot 7 Domestic (Lawn & Garden) 11 Injection Well					
	1							
w		E	4 Industrial	8 Air Conditioning	12			
Was a chemical / bacteriological sample submitted to Department?Yes							No X	
	S W S E If yes, mo/day/yr sample was submitted to be parameter to make the sample was submitted to be parameter to make the sample was submitted to be parameter to make the sample was submitted to be parameter to make the sample was submitted to be parameter to make the sample was submitted to be parameter to make the sample was submitted to be parameter to make the sample was submitted to be parameter to be pa							
Water Well Disinfected: Yes No								
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								
6 G	ROUT PLUG MAT	ERIAL: 1 No	eat cement (2) Cement gro	ut (3)Bentonite 4 (Other			
Grout Plug Intervals: From								
What is the nearest source of possible contamination:								
	1 Septic tank		6 Seepage pit 7 Pit privy	Fuel storage 12 Fertilizer storage			ecify below)	
3 Watertight sewer lines 8 Sewage lagoon 13 Insecticide storage							••••••	
4 Lateral lines 9 Feedyard 14 Abandoned water well 5 Cess Pool 10 Livestock pens 15 Oil well/Gas well								
Direction from well?								
FRO			GGING MATERIALS					
<u> </u>	5 24,0	Cem	ent Grout					
	.5 4.5		onste		REC	EIVE	D	
(2.5	Conc	rete		nct	0 7 200	14	
	BUREAU OF WATER							
			there are a second or the second of the seco					
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed								
CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year)								
by (signature) under the business name of Enumonmental Gooscience & Engineering								

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, Topeka, Kansas 66620-0001. Telephone: 785/296-3565. Send one to Water Well Owner and retain one for your records.