Form WWC-5P

KSA 82a-1212 ID NO. 00132297

1 Loc	CATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: Dickinson SE" NW" NW"			32	12	4 @w
Distance and direction from nearest town or city street address of well if located within city?					
302 E. 4th St Chapman, KS 2 WATER WELL OWNER: Home Oil Company					
RR #, St. Address, Box #: Rt. 1 Box 4 Board of Agriculture, Division of Water Resources					
3 MARK WELL'S LOCATION WITH 4 DEPTH OF WELL 30 ft.					
AN "X" IN SECTION BOX: WELL'S STATIC WATER LEVEL					
N WELL WAS USED AS:					
_X,	NW NE NE	1 Domestic	5 Public Water Supply	9 Dewateri	na .
		2 Irrigation 3 Feedlot	6 Oil Field Water Suppl 7 Domestic (Lawn & Ga	y M onitorir	ng Well
W	E	4 Industrial	8 Air Conditioning		
	SW SE Was a chemical / bacteriological sample submitted to Department? Yes				
Water Well Disinfected: Yes NoX					
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					
6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other					
Grout Plug Intervals: From 3 ft. to 30 ft., From ft. to ft., From ft., From ft., From ft., From ft.,					
What is the nearest source of possible contamination: 1 Septic tank 6 Seepage pit 11 Fuel storage 16 Other (specify below)					
2 5	Sewer lines Vatertight sewer lines	7 Pit privy 8 Sewage lagoon	12 Fertilizer storage 13 Insecticide storage	• • •	
4 Lateral lines 5 Cess pool		9 Feedyard 10 Livestock pens	14 Abandoned water well 15 Oil well/Gas well		
Direction from well?					
FROM		IGGING MATERIALS			
_ <u>``</u>	3 Native	naterial			
3	30' Bentonite	: chips			
				•	•
7 CONT	RACTOR'S OF LANDOWNER	R'S CERTIFICATION: This	water well was plugged	under my juriediction o	nd was completed on
CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 3-29-10 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) 4-28-10 under the business name of Green Field Contractor's					
by (signature)					

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.