	WATER WELL PLUGGING R	ECORD Form WWC-5P	KSA 82a-1212 ID N	0
1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: Dickinson	NW NW NW14	21	13	2 PM
Distance and direction from nearest town or city street address of well if located within city?				
515 SW 2nd St., Abilene, KS				
2 WATER WELL OWNER: R NVSOC ON MW7				
RR #, St. Address, Box #: PD Box 194 City, State, ZIP Code : Abilent 15 17410 Board of Agriculture, Division of Water Resources Application Number:				
MARK WELL'S LOCATION WITH 4 DEPTH OF WELL 15.				
AN "X" IN SECTION BOX: WELL'S STATIC WATER LEVEL ft.				
X	WELL WAS USED AS:			
NW NE	1 Domestic	5 Public Water Supply		
	2 Irrigation 3 Feedlot	6 Oil Field Water Supp7 Domestic (Lawn & G	arden) 11 Injection	Well
W E	4 Industrial	8 Air Conditioning	12 Other	
SW SE Was a chemical / bacteriological sample submitted to Department? Yes				
If yes, mo/day/yr sample was submitted				
S	Water Well Disinfected: Ye	sNo		
5 TYPE OF BLANK CASING USED:				
1 Steel 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (Specify below) 2 VC 4 ABS 6 Asbestos-Cement 8 Concrete Tile				
Blank casing diameter in. Was casing pulled? Yes No				
6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 entonite 4 Other				
Grout Plug Intervals: From ft. to ft., From ft. to ft., From to ft.				
What is the nearest source of possible				
1 Septic tank 2 Sewer lines	6 Seepage pit 7 Pit privy	11 Fuel storage 12 Fertilizer storage	16 Other (spec	cify below)
3 Watertight sewer lines4 Lateral lines	8 Sewage lagoon	13 Insecticide storage		
5 Cess pool	9 Feedyard10 Livestock pens	14 Abandoned water w15 Oil well/Gas well	veii	
Direction from well? How many feet?				
FROM TO PLU	JGGING MATERIALS			
0 3 501				
3 20 200+	maile ans			
2 20 Della	on the circu			

	· · · · · · · · · · · · · · · · · · ·			
7 CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on				
(mo/day/year)				
Water Well Contractor's License No				
by (signature)				
INSTRUCTIONS: Use typewriter or bat point pen. Please press firmly and print 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.				