	CATION OF WATER WELL: inty: Johnson	Fraction NW ¼ NW ¼ NW ¼ SI	Section Number Township Number Range Number T 13 S 25 X E N	
Street/Rural Address of Well Location; if unknown, distance &		wn, distance &	Global Positioning Systems (GPS) information:	
direction from nearest town or intersection: If at owner's address, check here		owner's address.	Latitude: NA (in decimal degrees) Longitude: NA (in decimal degrees)	
			Elevation: NA	
			Horizontal Datum WGS84, NAD83, NAD27 Collection Method:	
2. WATER WELL OWNER: Elan Automotive, Inc.		,	GPS unit (Make/model:	
	RR#, St. Address, Box #: 10701 Roc City, State ZIP Code: Overland I		Digital Map/Photo, Topographic Map Land Survey	
			Est. Accuracy: <3 m, 3-5 m, 5-15 m, >15	
3	MARK WELL'S LOCATION	4 DEPTH OF WEI	LLft. MW7	
	WITH AN "X" IN SECTION BOX:	WELL'S STATIC	WATER LEVEL NA ft	
	N	WELL WAS USED AS:		
	NW NE			
w	E .	Domestic Irrigation	Public Water Supply Dewatering Oil Field Water Supply X Monitoring	
**	SW SE	Feedlot Industrial	Domestic (Lawn & Garden) Injetion Well Air Conditioning Other	
		Was a chemical/bac	eriological sample submitted to Department? Yes NoX	
5 TYPE OF BLANK CASING USED:				
	Steel RMP (SR)	Wrought	Fiberglass Other (Specific below)	
		Asbestos-Cement	Concrete Tile	
Blank casing diameter 2 in. Was casing pulled? Yes X No If yes, how much 3' Casing heigh above or below land surface NA in.				
6 GROUT PLUG MATERIAL: Neat cement Cement grout X Bentonite X Other Asphalt: 0-0.5'; Soil: 0.5-3'				
	Grout Plug Intervals: From 3 ft to 19.0 ft, From ft to ft, From ft to ft,			
		s the nearest source of possible contamination: ptic tank Scepage pit Fuel storage Other (specify below)		
Sewer lines Pit privy Fertilizer st				
		ght sewer lines Sewage lagoon Insecticide storage lines Feed yard Abandoned water well Direction from well?		
	F			
F		NG MATERIALS	FROM TO PLUGGING MATERIALS	
-	0 0.5 Asphalt 0.5 3 Soil			
	3 19.0 Bentonite			
			KDHE ID: Roc Amoco (dba for Elan Automotive, Inc.);	
			U4-046-13480	
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 8/5-6/20 and this record is true to the best of my knowledge and belief. Kansas Water				
Contractor's License No. 757. This Water Well Record was completed on (mo/day/year) 8/7/2029 under the				
business name of Larsen & Associates, Inc. By (signature)				
Send one white copy to Kansas Department of Health & Environment, Geology Section, 1800 SW Jackson Street, Ste. 420, Topusa, KS 66612-1367. Send one copy to WATER WELL OWNER and retain one for your records				
Visit us at http://www.kdheks.gov/waterwell/index.html Telephone 785-296-5524.				
	KSA82a-1212 Revised 1/20/2015			

WATER WELL PLUGGING RECORD Form WWC-5P KSA 82a-1212 ID NO.

MW7