į.					
WATER WELL PLUGGING RECORD	Form WWC-5P	KSA 82a-1212	ID NO.		
1 LOCATION OF WATER WELL: County: Wabunsee	Fraction SW 1/4 SE 1/4 NV	Section Number 34	er Township Number	Range Number	
Distance and direction from nearest town or city street address of well if located within city?					
194 Main St., Harveyville, KS					
2 WATER WELL OWNER: KDHE Global Positioning System (decimal degrees. min. of 4 digits) Latitude: 38.79156					
RR#, St. Address, Box #: 1000 SW Jackson Longitude: 95.95992 Elevation: RIM: 1116.17 TOC: 1115.75					
City, State, ZIP Code: Topeka, KS 66612		Datum: Feet	Datum: Feet Above Mean Sea Level Data Collection Method: Legal Survey		
3 MARK WELL'S LOCATON	4 DEPTH OF WEI	LL 11.8	ft.		
WITH AN "X" IN SECTION BOX:		MW1 WATER LEVEL			
N	WELL WAS USE				
1 Domestic 5 Public Water Supply 9 Dewatering 2 Irrigation 6 Oil Field Water Supply 1 Monitoring					
W Tomestic (Lawn & Garden) 11 Injection Well					
SW SE 4 Industrial 8 Air Conditioning 12 Other					
S	Was a chemical/l	pacteriological sample	e submitted to Department	t? Yes No _X	
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 2 in. Was casing pulled? Yes X No If yes, how much 3 feet					
Casing height below land surface: 0.42 ft.					
6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other Soil: 0.5-3ft, Concrete: 0-0.5ft					
Grout Plug Intervals: From 3 ft. to 11.8 ft., From ft. to ft., From ft. to ft.					
What is the nearest source of possible contamination:					
1 Septic tank 6 Seepage pit (1) Fuel storage 16 Other (specify below) 2 Sewer lines 7 Pit privy 12 Fertilizer storage					
3 Watertight sewer lines 8 Sewage lagoon 13 Insecticide storage					
4 Lateral lines 9 Feedyard 14 Abandoned water well Direction from well? At source 5 Cess pool 10 Livestock pens 15 Oil well/Gas well How many feet?					
3 Cess poor 10 Elvestock pens 13 On went das wen 1100 many reet.					
FROM TO PLUGGING M		FROM TO	PLUGGING M	ATERIALS	
0 0.5 Conc			- Mariana		
0.5 3 So					
3 11.8 Bento	onite				
			- 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 1/8/08 1/8/08 1/8/08 1/8/08 1/8/08 1/8/08					
Well Contractor's License No. 757 . This Water Well Record was completed on (mo/day/year) 1/10/08 under the					
business name of Larsen and Associates, Inc. by (signature)					
INSTRUCTIONS: Please fill in blanks 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, Kangan 66612-1367. Telephone: 785/296-5522. Send one to Water Well Owner and retain one for your records. Visit us at http://www.kdheks.gov/waterwell.					