WATER WELL PLUGGING RECORD Form WWC-5P KSA 82a-1212

1 LOCATION OF WATER WELL: County: LYON	Fraction SW1/4 SW1/4 NE1/4	Section Number 10	Township Number 18	Range Number 11 E

Distance and direction from nearest town or city street address of well if located within city? LOTS 141, 143 - 927 MECHANIC - EMPORIA KS 66801

2 WATER WELL OWNER: BERTHA BLAUFUSS EST % LARRY PUTNAM ATTY.
RR#, St. Address, Box #: 605 LINCOLN
City, State, ZIP Code : EMPORIA KS 66801
Board of Agriculture, Division of Water Resources Application Number:

3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:

N
NW NE
X
W E
SW SE
S

4 DEPTH OF WELL.....28.....ft.

WELL'S STATIC WATER LEVEL..NA - ft. NO WATER

WELL WAS USED AS:

1 Domestic 5 Public Water Supply 9 Dewatering
2 Irrigation 6 Oil Field Water Supply 10 Monitoring Well
3 Feedlot 7 Lawn and Garden Only 11 Injection Well
4 Industrial 8 Air Conditioning (12) Other. ABANDONED

Was a chemical/bacteriological sample submitted to Department? Yes....No X.
If yes, mo/day/yr sample was submitted.....

Water Well Disinfected: 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 3" BRICK - REST LIME STONE R

Blank casing diameter.....in. Was casing pulled? Yes..X.. No..... If yes, how much...60'.....
Casing height above or below land surface.....60.....in.

6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other.....

Grout Plug Intervals: From..4.5..ft. to..5....ft., From.....ft. to .....ft., From..... to.....ft.

What is the nearest source of possible contamination:

1 Septic tank 6 Seepage pit 11 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
5 Cess Pool 10 Livestock pens 15 Oil well/Gas well

Direction from well? .....N..... How many feet? .....15.....

FROM	TO	PLUGGING MATERIALS
+ 1.5	4.5	CLAY BASE SOIL
4.5	5	BENTONITE
5	28	BACK FILL - CLAY
HAND DUG - NO INFORMATION		

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year)...10-05-96... and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. .....479..... This Water Well Record was completed on (mo/day/year) .....10-08-96..... under the business name of ..ELBERTS DRILLING.....
by (signature) .....[signature].....

INSTRUCTIONS: Use typewriter or ball 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, Topeka, Kansas 66620-0001. Telephone: 913/296-3565. Send one to Water Well Owner and retain one for your records.