				WATER WELL PLUGGING R	ECORD Form WWC-5F	KSA 82a-1212	ID NO	
1	LOCATI	ON OF WATE	ER WELL:	Fraction	Section Number	Township Nu	mber Range Number	
County: LYON				NF 14 14	16	19	11 5 E/W	
Distance and direction from nearest town or city street address of well if located within city?								
407 CoHonwood Emporia KS								
2	2 WATER WELL OWNER: GARY LongCOR							
		Address, Box e, ZIP Code	402	Colton 2000 Board of Agriculture, Division of Water Resources Application Number:				
3	MARK WELL'S LOCATION WITH		HTIW NOITA	4 DEPTH OF WELL				
	AN "X"	N SECTION I	BOX:	WELL'S STATIC WATE	R LEVEL Ct.			
				WELL WAS USED AS:				
	NW		- X =	1 Domestic	5 Public Water Supp	,	ewatering	
w	E		2 Irrigation 6 Oil Field Water Supply 10 Monitoring Well 3 Feedlot 7 Domestic (Lawn & Garden) 11 Injection Well					
"				4 Industrial	8 Air Conditioning		Other	
	SW	SW SE		Was a chemical / bacteriological sample submitted to Department? Yes				
				Water Well Disinfected: Ye	esX No			
	S							
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 Logist UP							
	Blank casing diameter							
						Other		
GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other								
What is the nearest source of possible contamination:								
1 Septic tank 2 Sewer lines				6 Seepage pit7 Pit privy	11 Fuel storage12 Fertilizer storage	16 Oth	ner (specify below)	
3 Watertight sewer lines 4 Lateral lines			er lines	8 Sewage lagoon9 Feedyard	13 Insecticide storaç14 Abandoned wate	ge er well	pource	
5 Cess pool				10 Livestock pens	15 Oil well/Gas well			
FROM TO PLUGGING MATERIALS 22 PT Rock Skom Top of Well yard approx middle 76 B5 C AY How many feet? Located in rear yard approx middle yard approx middle when the process of the p								
FROM TO PI			PI	LUGGING MATERIALS	cos Loe	aled are	middle	
	22	7	Rock	ARom Top of W	ell yard	of appear	· 40 87.	
	7.6	13 5	CIA	/	ulest	of now		
5	唐	4.5	Bento					
4.	5	0	BAK di	it rounded to)			
			allow	for settlemen	+			
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. Under the business name of by (signature) This Water Well Record was completed on (mo/day/year) This Water Well Record was completed on (mo/day/year) This Water Well Record was completed on (mo/day/year)							
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.