WATER WELL PLUGGING RECORD Form WV	
1 LOCATION OF WATER WELL: Fraction County: 1/4 1/4 1/4	Section Number Township Number Range Number 74 Sange Number T S XE W
Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here	Global Positioning Systems (GPS) information: DR Latitude: (in decimal degrees) Longitude: (in decimal degrees) Elevation: Datum: WGS84, NAD83, NAD27
	Collection Method:
2 WATER WELL OWNER: David W. Telve RR#, St. Address, Box #: 645 Rosel X City, State ZIP Code: Olea, KS & & & & 5	GPS unit (Make/Model: Digital Map/Photo, Topographic Map, Land Survey Est. Accuracy:
3 MARK WELL'S LOCATION 4 DEPTH OF WELL	
WITH AN "Y" IN SECTION	ATER LEVEL 14 ft
N WELL WAS USED A	ı
W NE Domestic Irrigation Feedlot Industrial	Public Water Supply Oil Field Water Supply Domestic (Lawn & Garden) Air Conditioning Injection Well Other Other No
5 TYPE OF BLANK CASING USED:	
Steel RMP (SR) Wrought Fiberglass Other (Specify below) PVC ABS Concrete Tile	
Blank casing diameter in. Was casing pulled? Yes No If yes, how much 5 ' Casing height above or below land surface in.	
6 GROUT PLUG MATERIAL: Neat cement Cement grout Bentonite Other	
Grout Plug Intervals: From ft. to ft., From ft. to ft., From to ft.	
What is the nearest source of possible contamination: Septic tank Seepage pit Fuel Storage Other (specify below) Fertilizer storage Watertight sewer lines Lateral lines Feedyard Abandoned water well Direction from well?	
Cess pool Livestock pens Oil w	ell/Gas well How many feet?
FROM TO PLUGGING MATERIALS	FROM TO PLUGGING MATERIALS
28.5 19' Sand	
19' 5' Subseil 5' 4.5' Bentomte	
4.5 ground Toplood	
TO STORY	
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No This Water Well Record was completed on (mo/day/year) under the business name of by (signature)	
INSTRUCTIONS: Use typewriter or ballpoint 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: 785/296-5524. Send one to Water Well Owner and retain one for your records. Visit us at http://www.kdheks.gov/waterwell/index.html.	
Check one: White Copy Blue Copy Pink Copy	