WATER V	VELL PLUGGING RECORD		KSA 82a-1212	25 ()	
1 LOCATION OF WATER WELL:	Fraction	8°08.744 N	1 1		
County: Lino	NL134 NW4 SET/4	Section Number	Township Number	Range Number	
1.5 South and 12 E of Pleasanton					
2 WATER WELL OWNER: KANS	ss Dept. of	Transportar	lon		
Distance and direction from nearest town or city street address of well if located within city? 1.5 South and 12 E of Plessanto. 2 WATER WELL OWNER: KANSS Dept. of Transportation RR#, St. Address, Box #: 507 N. Maple Board of Agriculture, Division of Water Resources City, State, ZIP Code: Carnett, KS_LLB3_Application Number: 3 MARK WELL'S LOCATION WITH 4 DEPTH OF WELL					
3 MARK WELL'S LOCATION WITH 4 DEPTH OF WELL					
AN "X" IN SECTION BOX: WELL'S STATIC WATER LEVEL					
WELL WAS USED AS:					
N W N E	2 Irrigation	5 Public Water Sup 6 Oil Field Water	ply 9 Dewatering Supply 10 Monitoring	g Well	
W	3 Feedlot E 4 Industrial	/ Lawn and Garden	Only 11 Injection		
" X					
S'W S'E Was a chemical/bacteriological sample submitted to Department? YesNo					
Water Well Disinfected: Yes X No					
5 TYPE OF BLANK CASING USED:					
Steel 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (specify below)					
Z PVC 4 ABS 6 Asbestos-Cement 8 Concrete Tile					
Blank casing diameterin. Was casing pulled? Yes No If yes, how muchin. Casing height above of below land surfacein.					
6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 entonite 4 Other					
Grout Plug Intervals: From. 7.7.ft. toft., Fromft. toft., From toft.					
What is the nearest source of possible contamination: NON C					
1 Septic tank 6 Seepage pit 11 Fuel storage 16 Other (specify below) 2 Sewer lines 7 Pit privy 12 Fertilizer storage					
2 Sewer lines 3 Watertight sewer lines					
4 Lateral lines 5 Cess Pool	9 Feedyard 10 Livestock pens	14 Abandoned water (
Direction from well? How many feet?					
	Tiow marry reet?	• • • • • • • • • • • • • • • • • • • •			
	UGGING MATERIALS				
97 6 Bento	site Chips	_225AUKS	•		
	<u> </u>				
7 CONTRACTOR'S OR LANDOWNER'S CERTLFICATION:This water well was plugged under my jurisdiction and was completed					
on (mo/day/year). 103					
Water Well Contractor's License No					
by (signature)					
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, Topeka, Kansas					
66620-0001. Telephone: 785/296-3565. Send one to Water Well Owner and retain one for your records.					
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