NC SE NE

WATER WELL PLUGGING RECORD

Form WWC-5P

KSA 82a-1212

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
county: Marion		C 1/4 SE 1/4 NE 1/4	21	22	3
Distance and direction from nearest town or city street address of well if located within city?					
2 WATER WELL OWNER: Earl qui Madson					
DB# St Address Poy # 4/2 & skeemore & T					
city, state, zip code: purposay, ks. 6(866 Application Number:					
MARK WELL'S LOCATION WITH 4 DEPTH OF WELL					
N WELL'S STATIC WATER LEVELft.					
		WELL WAS USED AS:			
N'W	N E	Domestic 2 Irrigation			
W × 1		3 Feedlot 7 Lawn and Garden Only 11 Injection Well 4 Industrial 8 Air Conditioning 12 Other			Well
			c		
S'W————S'E——— Was a chemical/bacteriological sample submitted to Department? Yes.					t? YesNo.X.
Water Well Disinfected: YesX No					
S					
5 TYPE OF BLANK CASING USED:					
1 Steel 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (specify below) 7 Power 2 PVC 4 ABS 6 Asbestos-Cement 8 Concrete Tile					
Blank casing diameterin. Was casing pulled? Yes No If yes, how much					
Casing height above or below land surfacein.					
6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other					
Grout Plug Intervals: From.4.5.ft. to.5ft., Fromft. toft., From toft.					
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? 50 VTH How many feet? 16					
FROM TO	PLUC	GGING MATERIALS			
34.37 tons SAND					
		BENTONITE			
	50 Yds	DIRT			
	29 GA	L CLOROX			
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:This water well was plugged under my jurisdiction and was completed on (mo/day/year)					
Water Well Contractor's License No This Water Well Record was completed on (mo/day/year)					
by (signature) East W. Madhen					
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: 913/296-3565. Send one to Water Well Owner and retain one for your records.					