WATER WELL PLUGGING RECOI	RD Form WWC-5P	KSA 82a-1212	ID NO.		
1 LOCATION OF WATER WELL: County: Butler	NE 1/4 SW 1/4 N		24	Range Number 3 E	
Distance and direction from nearest to	own or city street address	s of well if located withi	n city?		
219 N. Main, Whitewater, KS					
2 WATER WELL OWNER: Alan	Church		System (decimal degrees,	min. of 4 digits)	
RR#, St. Address, Box #: Rt 2 #	5 Cherry	Latitude: NA Longitude: NA			
		Elevation: NA			
City, State, ZIP Code: Maria	n, KS 66861	S 66861 Datum: NA Data Collection Method: NA			
3 MARK WELL'S LOCATON	4 DEPTH OF WE		ft. MW2		
WITH AN "X" IN SECTION	WELL'S STATIC	WATER LEVEL	NA ft.		
BOX:	WELL S STATIC	WATER LEVEL	NA II.		
N	WELL WAS USE	D AS:			
	1 Domestic	5 Public Water Suppl	y 9 Dewatering	,	
X-NW-T-NE	2 Irrigation 6 Oil Field Water Supply (10) Monitoring				
W E	3 Feedlot	7 Domestic (Lawn &		Vell	
SW SE	4 Industrial	8 Air Conditioning	12 Other		
S	Was a chemical/	bacteriological sample s	submitted to Department	Yes No <u>X</u>	
5 TYPE OF BLANK CASING USED					
		perglass 9	Other (specify below)		
		oncrete Tile			
Blank casing diameter 2.375 in. W	as casing pulled? Yes	X No If yes, how	much 2 feet		
Casing height above or below land sur	face NA in.				
6 GROUT PLUG MATERIAL: 1 N	eat cement 2 Cement	grout 3Bentonite	4)Other Soil: 0	-3 feet	
Grout Plug Intervals: From 3	ft. to 17.41 ft.,	From ft. to	ft., From	ft. to ft.	
What is the nearest source of possible	contamination:				
1 Septic tank 6 Seepage	pit 11 Fuel sto		(specify below)		
2 Sewer lines 7 Pit privy 3 Watertight sewer lines 8 Sewage					
4 Lateral lines 9 Feedyar	d 14 Abando	oned water well Direct	tion from well?		
5 Cess pool 10 Livestoo	k pens 15 Oil wel	l/Gas well How	many feet?		
FROM TO PLUGGING	GMATERIALS	FROM TO	PLUGGING MA	TERIALS	
	Soil				
3 17.41 Be	ntonite				
7 CONTRACTOR'S OR LANDOWN	FR'S CERTIFICATIO	N. This water well wa	s nlugged under my juris	diction and was	
	29/12 and this re	cord is true to the best of	f my knowledge and bel		
			eted on (mg/day/year)_	10/29/12 under the	
	Associates, Inc.	by (signature)			
INSTRUCTIONS: Please fill in blanks Environment, Bureau of Water, Geology	Section 1000 SW Jacks	wers. Send top three co	pies to Kansa Departme	nt of Health and	
785/296-5522. Send one to Water Well	Owner and retain one for	your records. Visit us	at http://www.kdh.ks.go	v/waterwell.	

Project Name & Site I.D: KSA 82a-1212