251	1125	WATER WE	ELL PLUGGING RECORD	Form WWC-5P	KSA 82a-1212	Taden Farm
1 LOCATION	OF WATER W	ELL:	Fraction	Section Number	Township Number	er Range Number
County:	reday)	ا مان	W1/45E1/45E1/4	26	26	1E
Distance and direction from nearest town or city street address of well if located within city?						
4510 E 37" St. N.						
2 WATER WELL OWNER: Koch Inclustries, Inc.						
RR#, St. Address, Box #: 4111 E 37 St. Al. Board of Agriculture, Division of Water Resources City, State, ZIP Code: Wichitch KS677ZO Application Number:						
3 MARK WELL'S LOCATION WITH 4 DEPTH OF WELLft.						
AN "X" 1	N SECTION BO	OX:	WELL'S STATIC WATE	ER LEVEL	 ft.	
		T	WELL WAS USED AS:			
	,	N E	4 Domestic	5 Public Water Sup	poly 9 Dewate	erina
			2 Irrigation		Supply 10 Monito	oring Well
w w		 	4 Industrial	8 Air Conditioning	12 Other.	
						\mathcal{N}
s \	' 	S E	Was a chemical/bacte If yes, mo/day/yr sa	eriological sample s ample was submitted _A	ubmitted to Depart	ment? YesNo/
		X	Water Well Disinfect	/	Ł	
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 Druck						
Blank casing diameterin. Was casing pulled? Yes No						
6 GROUT PLUG MATERIAL: Neat cement 2 Cement grout 3 Bentonite 4 Other						
Grout Plug Intervals: Fromft. toft., 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						
4 Lateral lines 9 Feedyard 14 Abandoned water well 5 Cess Pool 10 Livestock pens 15 Oil well/Gas well						
Direction from well?						
FROM	TO TO		GGING MATERIALS			, , ,
- A		7.00	GING MATERIALS	- white' h	rell was	located
9	2	Decr	<u>~~</u>	100	a form	located
100	10	Con	gutu_	mso	6.0	
18	28	Dan	d	_ dairy	Dari).	
				\Box \cup		
7 CONTRACT	OR'S OR LANG	WHER' FAR	RTIFICATION:This water	 well was plugged u	nder my jurisdicti	on and was completed
7 CONTRACTOR'S OR LANDOWNER'S CORTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year)						
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.