	WATER WELL PLUGG WE SE SW		WWC-5P KSA 82a-1212	ID NO.	
1 LOCATION OF WATER WELL		Section Section	Number Town	ship Number	Range Number
County: Sod O11 27 V		17		265	15
Distance and direction from neares	it town or city street address o	f well if located within	city?	# <i>200</i>	
Sel below					
2 WATER WELL OWNER: PAIN STEIN					
RR #, St. Address, Box #: 5857 FRINSTONG City, State, ZIP Code: Wichta KS 67701 Board of Agriculture, Division of Water Resources Application Number:					
3 MARK WELL'S LOCATION WI	TH 4 DEPTH OF W	ELL 25	ft		
AN "X" IN SECTION BOX: WELL'S STATIC WATER LEVEL LO ft.					
	WELL WAS U	SED AS:			
N W		stic 5 Pub	lic Water Supply	9 Dewate	ering
	2 Irrigat 3 Feedle	ion 6 Oil I	Field Water Supply nestic (Lawn & Garder		ring Well
w	E 4 Indust		Conditioning	•	
Was a chemical / bacteriological sample submitted to Department?Yes					
If yes, mo/day/yr sample was submitted					
s	Water Well Disinf	ected: Yes	No		
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 Blank casing diameter					
6 GROUT PLUG MATERIAL:	1 Neat cement 2 ce	ment grout 3 Ber	ntonite 4 Other	•••••	
Grout Plug Intervals:	From ft. to C	ft., From	ft. to	ft., From	to ft
What is the nearest source of possible contamination:					
1 Septic tank	6 Seepage pit		uel storage	(specific	
2 Sewer lines 3 Watertight sewer lines	7 Pit privy 8 Sewage lago		ertilizer storage isecticide storage	Tinso	u)
4 Lateral lines 5 Cess Pool	9 Feedyard 10 Livestock p		bandoned water well il well/Gas well		
Direction from well?					
FROM TO	PLUGGING MATERIALS	· · · · · · · · · · · · · · · · · · ·			
OF 10	24 11 11				
a5 10 (Juoce -				
	0 104 0 11 -				
	inun				
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					
by (signature)					
L VV	me we		· · · · · · · · · · · · · · · · · · ·		

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.