	WATER WELL PLUGGING RECO	ORD Form WWC-5P KSA	.82a-1212 ID NO	
LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
ounty: Sedquick	3E 1/4 NE 1/4 NE 1/4	33	245	1E
stance and direction from nearest tow				
801 E. 37th St		15- VMP-1-	<+D	
WATER WELLOWNER: New C	-oleman Holdings			
RR #, St. Address, Box #: 35 E City, State, ZIP Code : ルェルタ	lork, NY 10021	Application Number:	Division of Water Resources	:
MARK WELL'S LOCATION WITH	4 DEPTH OF WELL	17		
AN "X" IN SECTION BOX:	WELL'S STATIC WATER	R LEVEL NIA ft.		
	WELL WAS USED AS:			
NW NE	1 Domestic	5 Public Water Supp	bly 9 Dewate	ering
	2 Irrigation 3 Feedlot	6 Oil Field Water Su 7 Domestic (Lawn 8		ing Well
v	E 4 Industrial	8 Air Conditioning		
S W	Was a chemical / bacter	riological sample submitte	ed to Department?Yes	NoX
	If yes, mo/day/yr samp	ole was submitted		
S	Water Well Disinfected:	Yes No		
TYPE OF BLANK CASING USED:	<u>l</u>			
]	Wrought 7 Fiberg	plass 9 Other (Specify	( below)	
2 PVC 4 ABS 6	Asbestos-Cement 8 Concre	ete Tile5.t.s.i.v	aless Steel	
Blank casing diameter25 Casing height above or below la	in. Was casing pulled?		If yes, how mu	uch
GROUT PLUG MATERIAL:	Neat cement 2 Cement gro	out 3 Bentonite 4 (	 Other	
Grout Plug Intervals: From	n	., From ft. to	o ft., From	to ft.
What is the nearest source of p	ossible contamination:			
1 Septic tank 2 Sewer lines	<ul><li>6 Seepage pit</li><li>7 Pit privy</li></ul>	<ul><li>11 Fuel storage</li><li>12 Fertilizer storage</li></ul>	16 Other (spe	ecify below)
3 Watertight sewer lines	8 Sewage lagoon	13 Insecticide stora	age	
4 Lateral lines 5 Cess Pool	9 Feedyard 10 Livestock pens	14 Abandoned wate 15 Oil well/Gas we		
Direction from well? Sout		y feet?20		
	PLUGGING MATERIALS			
.5 13 Port	-land Cement			
	land Cement			
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_ ب ب	on (mo/day/year)	l: This water well was plugged under my jurisdiction and was completed and this record is true to the best of my knowledge and belief. Kansas This Water Well Record was completed on (mo/day/year)
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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.