			WATER WELL PLUGGING RECO	RD Form WWC-5P KSA	82a-1212 ID NO	To the first of the second of	
1	LOCATION OF WATER V	WELL:	Fraction	Section Number	Township Number	Range Number	
County: Sedgwick		SE 14 NE 14 NW 14	33	245	IE.		
_			city street address of well if lo				
			leman Holdings	54-VMP-4-	54D		
	RR #. St. Address. Box #:	35 E. 4	k, NY 10021	Board of Agriculture, Division of Water Resources			
3	MARK WELL'S LOCATIO AN "X" IN SECTION BO	N WITH	4 DEPTH OF WELL				
Г	N N		WELL'S STATIC WATER LEVEL				
	Nw_X	N E	WELL WAS USED AS:  1 Domestic	5 Public Water Supp	ly 9 <u>D</u> ewat	erina	
w L			2 Irrigation 3 Feedlot	6 Oil Field Water Sup 7 Domestic (Lawn &	pply 10 Monito	ring Well	
**		E	4 Industrial	8 Air Conditioning			
1	s w :	Was a chemical / bacteriological sample submitted to Department?Yes					
L	s		Water Well Disinfected:	Yes No			
5	TYPE OF BLANK CASIN	E OF BLANK CASING USED:					
	1 Steel 3 RMP ( 2 PVC 4 ABS		rought 7 Fibergl	ass 9 Other (Specify	below) Tubing		
	Blank casing diameter	.25 in	Was casing pulled?	Yes No		uch	
6	GROUT PLUG MATERI		eat cement 2 Cement grou		Other		
	Grout Plug Intervals:		. 5 ft. to	, From ft. to	ft., From	to ft	
What is the nearest source of poss  1 Septic tank 2 Sewer lines			6 Seepage pit	11 Fuel storage	16 Other (sp	ecify below)	
	3 Watertight sewer	lines	7 Pit privy 8 Sewage lagoon	<ul><li>12 Fertilizer storage</li><li>13 Insecticide stora</li></ul>	ige		
	4 Lateral lines 5 Cess Pool		<ul><li>9 Feedyard</li><li>10 Livestock pens</li></ul>	<ul><li>14 Abandoned wate</li><li>15 Oil well/Gas well</li></ul>			
	Direction from well?	Sout	L How many	/ feet?5			
FR	пом то	PLUC	GGING MATERIALS				
,	5 15	Portlan	d Cement				
•	5 6.5	Portla	d Cement				

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.

This Water Well Record was completed on (mo/day/year) under the business name of Whit=Tail Drilling, LLC 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.