	WATER WELL PLUGGING RECO	ORD Form WWC-5P KSA	A 82a-1212 ID NO	
1 LOCATION OF WATER WELL	.: Fraction	Section Number	Township Number	Range Number
County: Sedgwick	SE 1/4 NE1/4 NW 1/4	33	245	16
Distance and direction from neares	at town or city street address of well if I			
	St. N. in Wich		- D45	
RR #, St. Address, Box #: 35	w Coleman Holding		, Division of Water Resource	
City, State, ZIP Code : N	NYOVK, NY 10021	Application Number:		
MARK WELL'S LOCATION WI' AN "X" IN SECTION BOX:				
N	WELL'S STATIC WATE	R LEVEL NA ft.		
	WELL WAS USED AS:			
N W N E -	1 Domestic 2 Irrigation	<ul><li>5 Public Water Supp</li><li>6 Oil Field Water Su</li></ul>		ering oring Well
w	3 Feedlot 4 Industrial	7 Domestic (Lawn 8 8 Air Conditioning	& Garden) 11 Injection	on Well
	4 industrial	•		· V
S W		riological sample submitte ple was submitted		NOAL
S	Water Well Disinfected:	Yes No		
5 TYPE OF BLANK CASING US	SED:			
1 Steel 3 RMP (SR)	5 Wrought 7 Fibers	glass 9 Other (Specify	v helow)	
2 PVC 4 ABS	6 Asbestos-Cement 8 Concr	ete Tile5.±.6.k	aless Steel	
Blank casing diameter	ow land surface			uch
6 GROUT PLUG MATERIAL: Grout Plug Intervals:	Neat cements 2 Cement grows 5 ft. to 13 ft.		Otherft., From	
What is the nearest source	of possible contamination:			
1 Septic tank 2 Sewer lines	6 Seepage pit 7 Pit privy	11 Fuel storage 12 Fertilizer storag	16 Other (sp	ecify below)
3 Watertight sewer lines 4 Lateral lines		13 Insecticide stor	age	
5 Cess Pool	10 Livestock pens	15 Oil well/Gas we		
Direction from well?	outh Howman	ny feet?		
FROM TO	PLUGGING MATERIALS			
.5 13 Pa	ortland Cement			
.5 6.5 Po	Hland Cement			
7 CONTRACTOR'S OR LAN	UDOWNED'S CERTIFICATION T	his water well was always	ad under mu livitadiati-	and was sometimes
on (mo/day/year)	NDOWNER'S CERTIFICATION: THE	and this record is true	e to the best of my knowle	dge and belief. Kansas
7//2/06	under the business name of W.M.	tetail Drilling	Water Well Hecord was con	ipieled on (mo/day/year)
Dy (Signature)	into friend fall Collection.			

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.