	WATER WELL PLUGGING R	ECORD Form WWC-5P	KSA 82a-1212 ID N	10	
1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number	
County: SEDGWICK NE	city street address of well if loc COIM garage IL Bean N. Sene (6)	19	+265	KIE EM	
Distance and direction from nearest town or	city street address of well if loc	ated within city?	,	E/W	
1H SW of SW	come garge	re-4947 N.	Seneca W.	Ehita KS	
2 WATER WELL OWNER: Luci	11e Bean	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		, ,	
	N. Seneca L. ta ES	Board of Agriculture	e, Division of Water Resource:	ces	
MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:					
N	WELLS STATIC WATE	in Level			
	WELL WAS USED AS:				
NW NE	1 Domestic	5 Public Water Supply 9 Dewatering 6 Oil Field Water Supply 10 Manifesting Well			
	2 Irrigation 3 Feedlot	6 Oil Field Water Supply 10 Monitoring Well 7 Domestic (Lawn & Garden) 11 Injection Well			
W X	4 Industrial	8 Air Conditioning	12 Other		
SW SE	Was a chemical / bacteriological sample submitted to Department? Yes				
if yes, mo/day/yr sample was submitted					
S	Water Well Disinfected: Ye	es No			
5 TYPE OF BLANK CASING USED:					
	rought 7 Fibergla	ass 9 Other (Specify b	elow)		
2 PVC 4 ABS 6 A	sbestos-Cement 8 Concre				
Blank casing diameter	Was casing pulled?	Yes No	If yes, how mu	ch	
101	Neat cement 2 Cement gro		Other		
Grout Plug Intervals: From	. ZZ ft. to 3 ft.	, Fromft. to	ft., From	to f	
What is the nearest source of possib	le contamination:				
Septic tank Sewer lines	6 Seepage pit 7 Pit privy	11 Fuel storage12 Fertilizer storage	16 Other (spe	escud red.	
3 Watertight sewer lines 8 Sewage lagoon 1		13 Insecticide storage	(44	nage)	
4 Lateral lines 5 Cess pool	9 Feedyard 10 Livestock pens	14 Abandoned water v15 Oil well/Gas well	vell C /	, ,	
Direction from well?	How many	. 6			
Direction from weil?					
FROM TO P	LUGGING MATERIALS				
	-				

CONTRACTOR'S OF 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 Accesse No. This Water Well Record was completed on (mo/day/year) under the business name of by (signature)

INSTRUCTIONS: Use typewriter or ball point pen. <u>Please press firmly and 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, Geology Section, 1000 SW Jackson St., Ste. 420, Topeka, Kansas 66612-1367. Telephone: 785/296-5522. Send one to Water Well Owner and retain one for your records.