					NO 111 115	
		WATER WELL PLUGGING R	ECORD Form WWC-5P	KSA 82a-1212 ID 1	NO. 11 ' 11 -	
1	LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number	
Cou	unty: Sedawick	SW14SW1/SW 1/SW	30	26 >	2 E E/W	
Distance and direction from nearest town or city street address of well if located within city?						
2	2 WATER WELL OWNER: COASTA MAUT #7303					
RR #, St. Address, Box #: 29 MVAAA Board of Agriculture, Division of Water Resources City, State, ZIP Code : 10 SM in S CO Specification Number:						
3	MARK WELL'S LOCATION WITH	4 DEPTH OF WELL	18,11		MW-3	
	AN "X" IN SECTION BOX: N	WELL'S STATIC WATE	WELL'S STATIC WATER LEVEL DIAL ft.			
		WELL WAS USED AS:				
	NW NE	1 Domestic	5 Public Water Supply	9 Dewate		
		2 Irrigation 3 Feedlot	6 Oil Field Water Supp7 Domestic (Lawn & G	arden) Injection	n Well	
W	E	4 Industrial	8 Air Conditioning	12 Other	1/	
	SW — SE —	Was a chemical / bacteriolo If yes, mo/day/yr sample wa	gical sample submitted to De	partment? Yes	No	
	\mathcal{M}	Water Well Disinfected: Ye				
i	S	Water Well Distributed.				
5 TYPE OF BLANK CASING USED:						
1 Steel 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (Specify below)						
Blank casing diameter in. Was casing pulled? Yes No						
	Casing height above or below land s	urface3	ou	0	_	
GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout (3 Bentonite 4 Other						
What is the nearest source of possible contamination:						
			11 Fuel storage 12 Fertilizer storage	16 Other (sp	,	
3 Watertight sewer lines		8 Sewage lagoon	13 Insecticide storage			
4 Lateral lines 9 Feedyard 14 Abandoned water well 5 Cess pool 10 Livestock pens 15 Oil well/Gas well						
Direction from well? How many feet?						
FROM TO PLUGGING MATERIALS						
7	3m' Sur 1	omont				
Ì	8.11 3.0 ROM	touts				
	0.11 5 Dev	401000				
					MW-3	
					11110	
7 CONTRACTOR'S OF LANDOWNER'S OF PATICATION: This water well was plugged under my jurisdiction and was completed on						
	(mo/day/year)					
	under the pusiness name of 1000 11000 1000 1000					
INSTRUCTIONS: Use typewriter or ball point pen. Please press firmly and print 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	St., Ste. 420, Topeka, Kansas 66612-1367. Telephone: 785/296-5522. Send one to Water Well Owner and retain one for your records.					