a	, E . A	_	ELL PLUGGING RECORD	Form WWC-5P	KSA 82a-1212		
26W3			Fraction	Cooking Number			
H .				Section Number	Township	Number	Range Number
			NE 1/4NE 1/4SE1/4	017	27		
BO3 N. Broadway - Wichita, Kansas 2 WATER WELL OWNER: Town + Country Markets							
RR#, St. Address, Box #: P.O. Box 17087 Board of Agriculture, Division of Water Resources							
City, State, ZIP Code: Wichita, KS 67217 Application Number:							
MARK WELL'S LOCATION WITH 4 DEPTH OF WELL							
N WELL'S STATIC WATER LEVELft.							
			WELL WAS USED AS:				
n	\w	N E	1 Domestic	5 Public Water Sup	ply 91	Dewatering	
			2 Irrigation 3 Feedlot	6 Oil Field Water 7 Lawn and Garden	Supply (101) Only 11	Monitoring Injection	Well
W		X	E 4 Industrial	8 Air Conditioning	12 (Other	
	W	S E	Was a chemical/bacte If yes, mo/day/yr sa	eriological sample so ample was submitted.	ubmitted to [Department	? YesNo.X.
			Water Well Disinfect	ted: Yes No.	<u>(</u>		
s							
5 TYPE OF BLANK CASING USED:							
1 Steel 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (specify below) 2 PVC 4 ABS 6 Asbestos-Cement 8 Concrete Tile							
Blank casing diameter2in. Was casing pulled? Yes.X No							
6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other							
Grout Plug Intervals: From 19.ft. toft., Fromft. toft., From toft.							
What is the nearest source of possible contamination:							
1 Septic tank 6 Seepage pit 11 Fuel storage 6 Other (specify below) 2 Sewer lines 7 Pit privy 12 Fertilizer storage 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? N.W							
FROM	то	PLU	JGGING MATERIALS				
19	0	Ben	tonite_				
on (mo/ Water W	day/year). Well Contra /11/98	actor's Licer	ERTIFICATION: This water and this reconnse No. 53	rd is true to the be	st of my know	wledge and	lbelief. Kansas
INSTRUCTIONS: Use typewriter or ball point pen. Please press firmly and print clearly. Please fill in blanks,							

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: 913/296-3565. Send one to Water Well Owner and retain one for your records.