740	NZ09	WATER WEL	L PLUGGING RECORD	Form WWC-5P	(SA 82a-1212	
1 LOCATI	ON OF WATER WEL		Fraction	Section Number	Township Number	Range Number
County:	Sedswick		W1/4/W1/4/1E1/4	36	27	15
Distance and direction from nearest town or city street address of well if located within city? 56/ E. Harry, wichila						
2 WATER WELL OWNER: Quick trip						
RR#, St. Address, Box #: 5929 W. Control Board of Agriculture, Division of Water Resources City, State, ZIP Code: Wichila ICS 67212 Application Number:						
MARK WELL'S LOCATION WITH 4 DEPTH OF WELL						
AN "X" IN SECTION BOX: N WELL'S STATIC WATER LEVELft.						
			WELL WAS USED AS:			
 N	WN	E	1 Domestic 2 Irrigation		Supply 10 Monitoring	Well
w	·	E	3 Feedlot 4 Industrial	7 Lawn and Garden (8 Air Conditioning	Only 11 Injection 12 Other	
S W S E Was a chemical/bacteriological sample submitted to Department? YesNo						
	IT yes, mo/day/yr sampte was submitted					
L	S		Water Well Disinfect	ted: Yes No.X		
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 diameterZin. Was casing pulled? Yes NoX. If yes, how much						
6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other						
Grout Plug Intervals: From Z.ft. to.Z.f., Fromft. toft., From toft.						
What is the nearest source of possible contamination:						
1 Septic tank 6 Seepage pit 11 Fuel storage 16 Other 2 Sewer lines 7 Pit privy 12 Fertilizer storage 3 Watertight sewer lines 8 Sewage lagoon 13 Insecticide storage						cify below)
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	то	PLUG	GING MATERIALS			
2	24 €	B	ntonite			
7 CONTRACTOR'S OR LANDOWNER CERCIFICATION: This water well was plugged under my jurisdiction and was completed						
on (mo/day/year)						
by (si	gnature)		nder the business name		MAD IRCON. SRING	"(LRH ₁ .HNS./
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, Topeka, Kansas 66620-0001. Telephone: 913/296-3565. Send one to Water Well Owner and retain one for your records.						