$\wedge \wedge$	10-5	WATER W	ELL PLUGGING RECORD	Form WWC-5P	KSA 82a-1212 211	1007
1 LOCATI	ON OF WATER	WELL:	Fraction	Section Number	Township Number	Range Number
County:	Sadaw	ick	NW1/4 NE1/4 NW1/4	30	27	1E
Distance and direction from nearest town or city street address of well if located within city?						
2 WATER WELL OWNER: Friends University						
RR#, St. Address, Box #: 2100 Universely Board of Agriculture, Division of Water Resources City, State, ZIP Code: Wichta KS 67213 Application Number:						
3 MARK WELL'S LOCATION WITH 4 DEPTH OF WELL						
AN "X" IN SECTION BOX: N WELL'S STATIC WATER LEVEL 1.3.43ft.						
	Х		WELL WAS USED AS:			
	1 W	-N E	1 Domestic 2 Irrigation	5 Public Water Sup 6 Oil Field Water		
w			3 Feedlot	7 Lawn and Garden 8 Air Conditioning	Only 11 Injection	Well
			17.7.00	o Am denarcioning	12 01	Λ,
	s'w	-S E		eriological sample s ample was submitted.	ubmitted to Departmen	t? YesN
				ted: Yes No	/	
	S		mater mett promises			
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 diameter						
6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other						
Grout Plug Intervals: From. 2.ft. to 20.ft., Fromft. toft., From toft.						
What is the nearest source of possible contamination:						
1 Septic tank 6 Seepage pit 11 Fuel storage 16 Other (specify below) 2 Sewer lines 7 Pit privy 12 Fertilizer storage						
2 Sewer times 7 Fit privy 12 Fertilizer storage						
5 Cess Pool 10 Livestock pens 15 Oil well/Gas well						
Direction from well?						
FROM	то	PLU	GGING MATERIALS			
\Box	2.	Soil				
2	10	Bini	onite			
CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:This water well was plugged under my jurisdiction and was completed on (mo/day/year)						
Water Well Contractor's License No. 53/ This pater Well Record was completed on (mo/day/year)						
	gnature)		under the business name	Mayour	The same of the sa	portery, att 1. Was
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: 785/296-3565. Send one to Water Well Owner and retain one for your records.						