			WATER WELL PLUGGING	RECORD Form WWC-5P	KSA 82a-1212 ID I	NO	
1 LOCATION OF WATER WELL:			Fraction	Section Number	Township Number	Range	Number
County: SEDGWICK			5W¼ NW ¼ NW¼	15	T275	R	1 EM
Distance and	direction from nea	arest town or c	ity street address of well if lo		1215	1 1	1 69
base	ment -	1216	N Kansas,	Wichita K	(S		
	R WELL OWNER:	Suc	BOHNERT				
	t. Address, Box #: ate, ZIP Code :		, N. KANSAS CHITA KS 67	Board of Agriculture Application Number	e, Division of Water Resour	ces	
3 MARK	WELL'S LOCATION	ON WITH	4 DEPTH OF WELL	25 ft.			
AN "X"	'IN SECTION BO	X:	WELL'S STATIC WATER LEVEL ft.				
	N		WELL WAS USED AS	S:			
× NV	v——— N	1 1E	1 Domestic	5 Public Water Supply	9 Dewater	ing	
			2 Irrigation 3 Feedlot	6 Oil Field Water Supply 10 Monitoring Well			
W E			4 Industrial	8 Air Conditioning			
SW SE Was a chemical / bacteriological sample submitted to Department? Yes							
If yes, mo/day/yr sample was submitted							
	S		Water Well Disinfected:	res No			
5 TYPE	OF BLANK CASIN	IG USED:					
1 Stee			ught 7 Fiber	glass 9 Other (Specify be	elow)		
2 PVC			estos-Cement 8 Concr		•	•••••	
	casing diameter g height above or l		Was casing pulled?		If yes, how mu	ch	
0	T PLUG MATERIA		at cement Cement or		Other		
	Plug Intervals:		/5 ft. to	t., From 3 ft. to		to	ft
What is the nearest source of possib 1 Septic tank			6 Seepage pit	11 Fuel storage	6 Other (spe	aifu balaw	
2 Sewer lines			7 Pit privy	12 Fertilizer storage	wall me		dnof
3 Watertight sewer lines 4 Lateral lines			8 Sewage lagoon 9 Feedvard	13 Insecticide storage14 Abandoned water v	vell		
5 Cess pool		10 Livestock pens	15 Oil well/Gas well				
Directi	on from well?		How man	y feet?			
FROM	ТО	PLU	IGGING MATERIALS				
3	0	100	- t				
15	3	Real	tomite				
		<	1 blench				
25	15	Juno	1 bleach				
-							
(mo/da	y/year) [.0.] 7	21/03	***************************************	s water well was pluggedand this record is true	to the best of my knowle	dae and belie	f. Kansas
Water V	Vell Contractor's Li	cerise No	business name of TMA	ENTER PRISES	ter Well Record was comp	oleted on (mo/	day/year)
by (sig	nature)	V pr	ms My				

INSTRUCTIONS: Use typewriter of 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., Ste. 420, Topeka, Kansas 66612-1367. Telephone: 785/296-5522. Send one to Water Well Owner and retain one for your records.