					WATER WELI	_ PLUGGING	RECORD	Form WWC-5P	KSA 82a-1	212 ID N	O	
1	LOCAT	TION OF V	WATER WELL:		Fraction		Section	n Number	Township	Number	Range	Number
Cou	کد nty:	Edgu	rick		VILLA NW	A Neda		25	5	275	1	O W
-			rom nearest tow				cated within	city?				
0	n Th	<u> </u>	outhers	1	berra	of Ki	aloggi	& Oliva	er Str	SOT S	worth	
2	WATE	R WELL C	WNER: KA	750	ts DEPA	rimen	of H	pard of Agriculture	en viron	MONT		
	RR #, S City, Sta	t. Address ite, ZIP Co	s, Box #: 1000 ode : Top) S ETC	A ICS.	4661	2-13N	pycation Number	e, Division of W r:	ater Resourc	es	
3			OCATION WITH		· 1			ft.				
_		N		_	WELL'S	STATIC WAT	ER LEVEL.	ft.				
					WELL V	VAS USED AS	S:					
	NV	v 	NE	-		Domestic rrigation		blic Water Supply Field Water Supp		9 Dewaterin		
w				 E	3 1	Feedlot	7 Do	mestic (Lawn & G		11 Injection V	Vell	
"				-	4 1	ndustrial	8 Air	Conditioning		12 Other	 هم	
	sv	,	SE		Was a chemical / bacteriological sample submitted to Department? Yes							
If yes, mo/day/yr sample was submitted												
L		S]	Water Well [Disinfected: `	res	NoX				
5	TYPE OF BLANK CASING USED:											
	1 Stee			Wro		7 Fiberg	•	Other (Specify b	,			
	2 PVC		_		estos-Cement			火 №		yes, how muc	20) FT
			meter Dove or below lar			asing pulled?		No	If	yes, now muc	n	í
6	GROU	T PLUG M	MATERIAL:	1 Ne	at cement	2 Cement gr		Bentonite 4 C	Other			
	Grout F	Plug Interv	vals: From	n	ft. t	o !? f	t., From	ft. to	ft.,	From	to	fr
	What is	the near	est source of pos	sible	contamination	:						
Septic tank Sewer lines					6 Seepage 7 Pit privy	•		uel storage ertilizer storage	16	16. Other (specify below)		
3 Watertight sewer lines					8 Sewage	lagoon	13 lr	nsecticide storage				
4 Lateral lines 5 Cess pool				9 Feedyard 10 Livestock pens			bandoned water v il well/Gas well	vell				
		on from w	ell? 999	,		How man	v feet?	999				
						Tiow man	, 100ti		•••••			
F	ROM	ТО			GGING MATE							
1:	5'	0	1 3/8 6	NE	ton: to	chips						
			Hydr	1te	ل							
			, , , , ,									
7	CONT	RACTOR	'S OF LANDO	WNE	R'S CERTIFI	CATION: Thi	s water we	ell was plugged this record is true	under my ju	risdiction an	d was com	pleted on
	`	, ,	actor's License No		665		and		e to the best o ter Well Reco	,	•	

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, 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.