					WATER WELL PLUGGING RI	ECORD Form WWC-5P	KSA 82a-1212 ID N	0	
1	1 LOCATION OF WATER WELL:				Fraction	Section Number	Township Number	Range Number	
Cou	inty: SE	N=W	ILK.		NW4 NW4 5W4	26	T275	RIEEN	
Distance and direction from nearest town or city street address of well if located within city?									
NW Corner - basement 747 S. Holyoke									
WATER WELL OWNER: Pam Weber 747 S. Holy oke									
	City, State, ZIP Code: With ta, KS 67211 Board of Agriculture, Division of Water Resources Application Number: Unknown								
3	3 MARK WELL'S LOCATION WITH 4 DEPTH OF WELL								
_	Ņ			_	WELL'S STATIC WATER LEVEL ft.				
					WELL WAS USED AS:				
	NW	/ 	NE	1	1 Domestic 2 Irrigation	5 Public Water Supply6 Oil Field Water Supply			
w				E	3 Feedlot	7 Domestic (Lawn & C	arden) 11 Injection	Well	
**	×] =	4 Industrial	8 Air Conditioning	12 Other		
	SW	/	SE		Was a chemical / bacteriolog	Vas a chemical / bacteriological sample submitted to Department? Yes			
	s				If yes, mo/day/yr sample was submitted Water Well Disinfected: Yes				
Ļ				_					
5	TYPE OF BLANK CASING USED:								
	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 growt 3 Bentonite 4 Other							
	What is the nearest source of possible contamination:								
		eptic tank			6 Seepage pit	11 Fuel storage	18 Other (spec	cify belew)	
	2 Sewer lines				7 Pit privy	12 Fertilizer storage	م سب	s asandnes	
	3 Watertight sewer lines4 Lateral lines				8 Sewage lagoon9 Feedyard	13 Insecticide storage14 Abandoned water v		s asanarney	
						15 Oil well/Gas well	-		
Direction from well? How many feet?									
FROM TO PL				PL	JGGING MATERIALS				
	3 0 Cer			m	mt				
	10 3			<u>3</u> e	int In: Le				
	30	10	5,	<u></u>	1 16 leach		RECEIVED		
					,		AUG 1 9 2004		
						BU	REAU OF WATER		
						_			
Т									
CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on									
Water Well Contractor's License No									
CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 2 This Water Well Record was completed on (mo/day/year) by (signature)									
INIC									
ans	wers. Se	and top th	ree copies to K	ball (ans	point pen. <u>Please press firm</u> as Department of Health ar	<u>ny</u> and <u>print</u> clearly. Plea d Environment, Bureau d	of Water, Geology Section	n, 1000 SW Jackson	
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.									