WATER WELL PLUGGING RECORD Form WWC-5P KSA 82a-1212 ID NO._____

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1 LOCAT	ION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: So	eda, lick SE	SE1/4 SE1/4 SW1/4	34	275	IE ENW
Distance and direction from nearest town or city street address of well if located within city?					
2369 S. Grove					
2 WATER WELL OWNER: JOHN STASTNY					
RR #, St. Address, Box #: 2369 S. Grovel Board of Agriculture, Division of Water Resources					
	te, ZIP Code :	hita, KS, 672	Application Number:		
3 MARK WELL'S LOCATION WITH		4 DEPTH OF WELL			
AN "X"	IN SECTION BOX:	WELL'S STATIC WATE	R LEVEL 23. ft.		
	N I I I I I I I I I I I I I I I I I I I	WELL WAS USED AS:			
		1 Domestic	5 Public Water Supply	9 Dewater	ing
NW	/ NE	2 Irrigation	6 Oil Field Water Suppl	10 Monitorii	ng Well
w	E	3 Feedlot 4 Industrial	2 Domestic (Lawn & Ga 8 Air Conditioning		Well
4			•	-	
SW SE Vas a chemical / bacteriological sample submitted to Department? Yes NoX					
		Water Well Disinfected: Ye	• •		
	A _S	Water Wen Disinfected.	55., //		
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 If yes, how much Was casing pylled? Yes NoX If yes, how much					
Casing height above or below land surface					
6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other ft., From					
Grout Plug Intervals: From					
	eptic tank	6 Seepage pit	11 Fuel storage	16 Other (spe	cify below)
2 Sewer lines		7 Pit privy	12 Fertilizer storage 13 Insecticide storage		A second second second
3 Watertight sewer lines 4 Lateral lines		8 Sewage lagoon 9 Feedyard	14 Abandoned water w	FHA	Requirement
5 Cess pool		10 Livestock pens	15 Oil well/Gas well	To Se	
Direction	on from well?	How many	feet?		
FROM TO PLUGGING MATERIALS					
25 3 Compacto		acted Soil			
3 02 Cement Grout					
			<u> </u>		
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					
by (signature)					
INSTRUCTIONS: Use type writer 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, Geology Section, 1000 SW Jackson					
St., Ste. 420	. Topeka, Kansas 66612-13	367. Telephone: 785/296-55	22. Send one to Water We	ell Owner and retain on	e for vour records.