				WATER WELL PLUGGING		n WWC-5P KS.	A 82a-1212	ID NO	_#11-7-	
1 Cou		ION OF WATE	ER WELL:	Fraction  SM1/4 MM 1/4 MM	Section Section	Number	Township 27	Number	Range	Number
Dist	ance and	_	/}	or city street address of we	II if located with	in city?	<u> </u>			
2		WELLOWNE	R: 191	rnette 7 Lassly 2 Jannet		eard of Agriculture	Division of Wa	iter Resources		
		Address, Box e, ZIP Code	" wi	hito Ka	67203	plication Number	-74	me		
3		WELL'S LOCA IN SECTION		4 DEPTH OF WELL						
ſ		N N		WELL'S STATIC W	ATER LEVEL	<i></i> ft.				
144	N E			WELL WAS USED AS:  1 Domestic 5 Public Water Supply 9 Dewatering 2 Irrigation 6 Oil Field Water Supply 10 Monitoring Well 3 Feedlot 7 Domestic (Lawn & Garden) 11 Injection Well						
W S W S E Was a chemical / bacteriological sample submitted to Department? Yes										
	Water Well Disinfected: Yes No . X									
5	TYPE (	OF BLANK CA	ASING USED:					<u> </u>		·
	1 Stee			Vrought 7 Fi		Other (Specif	fy below)	Senf	Por	
	Blank Casing	casing diame height abov	eterin e or below land	Was casing pul	led? Yes	<b>X</b> No .	If	yes, how mi	<sub>uch</sub> 5	••••••
6	GROUT	PLUG MAT		leat cement 2 emen	-	Sentonite 4	Other			
	Grout I	Plug Interval	s: From	Oft. to 2/	ft., From.	ft.	to ft.	, From	to	ft
		s the neares eptic tank	t source of pos	sible contamination: 6 Seepage pit	11	Fuel storage	10	6 Other (sp	ecify helow)	
	2 Sewer lines			7 Pit privy	12	Fertilizer stora	ge			
3 Watertight sewer lines 4 Lateral lines			er lines	8 Sewage lagoon 9 Feedyard		13 Insecticide storage 14 Abandoned water well				
		ess Pool		10 Livestock pens		Oil well/Gas we				
	Direct	tion from we	ll?	How	many feet?		•••••			
FROM		то	PLI	JGGING MATERIALS						
2/		0	Com	ent Dore	t					
ļ										
		i								
7	CONT	BACTOR'S	OB LANDOWA	IER'S CERTIFICATION	This water	well was ninge	aed under my	jurisdiction	and was o	completed
ľ	on (mo	/day/year) Vell Contracto	or's License No.	IER'S CERTIFICATION	and t	his record is tru	e to the best of	f my knowled	dge and beli	ef. Kansas o/day/year)

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, Topeka, Kansas 66620-0001. Telephone: 785/296-3565. Send one to Water Well Owner and retain one for your records.

by (signature) .....