W	ATER WELL PLUGGING	RECORD Form WW	C-5P KSA 82	2a-1212 ID NO.	
1	LOCATION OF WATER WELL: County: Sedgwick	Fraction NE NE SE NE	1/4 17	Township Number T 27 S	1 ✓E □W
	Street/Rural Address of Well Location, direction from nearest town or intersec check here 1161 N. Broadwa	Global Positioning Systems (GPS) information: Latitude:(in decimal degrees) Longitude:(in decimal degrees) Elevation: Datum: WGS84, NAD83, NAD27 Collection Method:			
2	WATER WELL OWNER: KDH RR#, St. Address, Box #: 1000	GPS unit (Make/Model: Digital Map/Photo, Topographic Map, Land Survey			
	City, State ZIP Code: TOPEKA, KS 66612-1367 Est. Accuracy: \square <3 m, \square 3-5 m; \square 3-5				> 15 m
3 W	MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX: N WELL'S STATIC WATER LEVE 14.43 ft JAN 1 1 2010 WELL WAS USED AS: Domestic Public Water Supply Oil Field Water Supply Oil Field Water Supply Monitoring				
Steel RMP (SR) Wrought Fiberglass Other (Specify below) ABS Concrete Tile Blank casing diameter in. Was casing pulled? Yes No If yes, how much 3 Feet Casing height above or below land surface in.					
GROUT PLUG MATERIAL: Neat cement Cement grout Bentonite Other Other Grout Plug Intervals: From 3 ft. to 16.40 ft., From ft. to ft., From to ft. What is the nearest source of possible contamination: Septic tank Seepage pit Fuel Storage Fertilizer storage Other (specify below) Sewer lines Pit privy Fertilizer storage					
	Watertight sewer lines Lateral lines Feedyard Abandoned water well Direction from well? Cess pool Livestock pens Oil well/Gas well How many feet?				
	FROM TO PLUC	GGING MATERIALS	FROM TO	PLUGGING	MATERIALS
	1 3 Native soi	ls			
	3 16.40 Bentonite	Grout			1414C
					MW5
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 12/03/2009 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 594 . This Water Well Record was completed on (mo/day/year) 12/22/2009 under the business name of Coranco Great Plains, Inc. by (signature)					
INSTRUCTIONS: Use typewriter or ballpoint 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: 785/296-5524. Send one to Water Well Owner and retain one for your records. Visit us at http://www.kdheks.gov/waterwell/index.html.					
Check one: White Copy Blue Copy Pink Copy					