V	VATER WELL PLUG	GING RECORD For	rm WW	C-5P	KSA 82:	a-1212 ID NO.		
1	LOCATION OF WATER	WELL: Fraction 55, 5	FSF	Section	Number	Township Number	Range Number	
				4 <u>4</u>	<u>- / </u>	T 27 S	XE W	
		Il Location; if unknown, distance or intersection: If at owner's add	Global Positioning Systems (GPS) information: Latitude: (in decimal degrees)					
	check here	ness,	Longitude: (in decimal degrees)					
			Elevation:					
	3019 Welma			Datum: WGS84, NAD83, NAD27 Collection Method:				
-	WATER WELL OWNER: MI Keyly				GPS unit (Make/Model:			
2			Digital Map/Photo, Topographic Map, Land Survey					
	RR#, St. Address, Box #: 3019 Williams City, State ZIP Code: Williams							
Est. Accuracy: 3 m , $3-5 \text{ m}$, $5-15 \text{ m}$							5-15 m, □ > 15 m	
3	MARK WELL'S LOCATION 4 DEPTH OF WELL 30 ft.							
WITH AN "X" IN SECTION BOX: N WELL'S STATIC WATER LEVEL 15								
	WELL SSTATIC WATER LEVEL II WELL WAS USED AS:							
		_ <u>_</u>	USED AS); 1		_		
	NW NE Domestic Public Water Supply Dewatering							
	w	Irrigation Feedlot	×		d Water Sup			
	Industrial Air Conditioning Other							
	SW SE	1			_			
		Was a chemic	al/bacteric	ological san	nple submit	ted to Department? Y	es No 🟋	
5	TVDE OF BLANK CAS	ZINC LISED.						
3	TYPE OF BLANK CASING USED:							
	Steel RMP (SR) Wrought Fiberglass Other (Specify below)							
	PVC ABS Asbestos-Cement Concrete Tile							
	Blank casing diameter in. Was casing pulled? Yes No If yes, how much							
	Casing height above or below land surface in.							
6	GROUT PLUG MATERIAL: Neat cement Cement grout Bentonite Other							
	Grout Plug Intervals: Fromft. toft., Fromft. toft., Fromft.							
l	What is the nearest source of possible contamination: Septic tank Seepage pit Fuel storage Other (specify below)							
	Sewer lines Pit privy Fertilizer storage							
	Watertight sewer lines Sewage lagoon Insecticide storage							
	Lateral lines Feedyard Abandoned water well Direction from well? East							
	Cess pool Livestock pens Oil well/Gas well How many feet?							
	FROM TO	()LUGGING MATERIA	s L	FROM	TO	PLUGGING	MATERIALS	
	30 15 -	Sand 4 S	well					
	15 4	Coment gr	out					
	4 0	in a lit						
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was								
completed on (mo/day/year) 1273-12 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 47 2								
Well Contractor's License No. 47 2. This Water Well Report was completed on (mo/day/year) /2-/3-/2 under the business name of Dear Lon Function business name of Dear Lon Function business name of Dear Lon Function business name of Dear Long Funct								
· Organisation								
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.								
, -	I	J						