W.	ATER WELL PLUGGING	RECORD Form V	WWC-5P	KSA 82:	a-1212 ID NO.		
1	LOCATION OF WAPPR AVELL		Section	Number	Township Number	Range Number	
	County: Da College			)	TZ7s	E W	
	Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address,  Global Positioning Systems (GPS) information:  Latitude:						
	check here		Longitude:(in decimal degrees) Elevation:				
1	oncer here	7 1					
1	960 n°	Datum:	Datum: WGS84, NAD83, NAD27 Collection Method:				
	A						
2	WATER WELL OWNER:  RR#, St. Address, Box #:  City, State ZIP Code:  William Topographic Map, Land Survey  Est. Accuracy:   St.						
3	MARK WELL'S LOCATION	4 DEPTH OF WELL 20 ft.					
	WITH AN "X" IN SECTION BOX:	WELLSCTATIC	WELL'S STATIC WATER LEVEL /O ft				
	NN	1					
		WELL WAS USE	D AS:				
Ì	NW NE	Domestic		Water Suppl		U	
	W SW SEP E Irrigation Feedlot Domestic (Lawn & Garden) Injection Well Other Was a chemical/bacteriological sample submitted to Department? Yes No						
١ ٣							
1							
	S						
5	TYPE OF BLANK CASING USED:						
	Steel RMP (SR) Wrought Fiberglass Other (Specify below)						
	PVC ABS Asbestos-Cement Concrete Tile						
	Blank casing diameter //yin. Was casing pulled? Yes No I If yes, how much //						
	Blank casing diameter / / fin. Was casing pulled? Yes   No   If yes, how much / Casing height above or below land surface   S in.						
	Casing height above of below land surface in.						
6	GROUT PLUG MATERIAL: Neat cement Cement grout Bentonite Other						
	Grout Plug Intervals: From 70 ft. to 7 ft., From ft. to ft., From ft. to ft.						
	What is the nearest source of possible contamination:						
	Septic tank Seepage pit Sewer lines  Seepage pit Fuel storage Fertilizer storage  Other (specify below)						
	Watertight sewer lines   Sewage lagoon   Insecticide storage						
	Lateral lines Feedyard Abandoned water well Direction from well?						
	Cess pool Livestock pens Oil well/Gas well How many feet?						
	FROM TO PL	UGGING MATERIALS	FROM	ТО	PLUGGING	MATERIALS	
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	20 0	one a perc	c	<del> </del>			
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7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was							
con	completed on (mo/day/year) $\frac{5-5-14}{}$ and this record is true to the best of my knowledge and belief. Kansas Water						
Well Contractor's License No. 472 . This Water Well Record was completed on (mo/day/year) 5-5-14 under the business name of Sorton Puna 4 (Coll by (signature))							
bus	iness name of 13. oar Oc	so Lump +	by (s	ignature)	) lowel 1	Jack	
INSTRUCTIONS: Use typewriter or ballpoint pen. Please press firmly and print clearly. Please fill in blanks, underline or circle the							
cor	rect answers. Send top three copie	es to Kansas Department of	Health and Env	rironment, B	Bureau of Water, Geole	ogy Section, 1000 SW	
	kson St., Ste. 420, Topeka, Kansas			Send one to	Water Well Owner a	nd retain one for your	
records. Visit us at http://www.kdheks.gov/waterwell/index.html.							