W	ATER WELL PLUGGING REC	ORD Form WV	VC-5P KSA 82	a-1212 ID NO.		
1	County: Fra	iction W. NW. St	Section Number	Township Number T Z / S	Range Number	
	Street/Rural Address of Well Location; if un		Systems (GPS) inform	nation: (in decimal degrees)		
	direction from nearest town or intersection:	Latitude: (in decimal degrees) Longitude: (in decimal degrees)				
	check here \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	haure	Elevation:			
		.	Datum: WG Collection Method:	S84, ☐ NAD83,	☐ NAD27	
_	WATER WELL OWNER.	GPS unit (Make/Model:				
2	WATER WELL OWNER: Q	☐ Digital Map/Photo, ☐ Topographic Map, ☐ Land Survey				
RR#, St. Address, Box #: 2 2 7 J J Digital Map/Photo, Topographic M City, State ZIP Code: Land Karanger Topographic M Est. Accuracy: 3 m, 3-5 m,					Marin .	
)•15 III,	
3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX: 4 DEPTH OF WELL 35 ft. WELL'S STATIC WATER LEVEL						
	N N	WELL WAS USED AS:				
	W SW NE Domestic Public Water Supply Dewatering Monitoring Injection Well Domestic (Lawn & Garden) Injection Well Other Was a chemical/bacteriological sample submitted to Department? Yes No No No No No No No N					
u						
'						
5	TYPE OF BLANK CASING USED:					
	Steel RMP (SR) Wrought Fiberglass Other (Specify below) PVC ABS Concrete Tile					
	Blank casing diameter in. Was casing pulled? Yes \bigcap No \bigcap If yes, how much					
	Casing height above or below land surface in.					
6	6 GROUT PLUG MATERIAL: Neat cement Cement grout Bentonite Other					
	Grout Plug Intervals: Fromft. to /Oft., Fromft. toft., Fromft. toft.					
	Grout Plug Intervals: From ft. to / ft., From ft. to ft. to ft.					
	What is the nearest source of possible contamination:					
	Septic tank Seepage pit Pit privy Fuel storage Fertilizer storage Other (specify below)					
	Watertight sewer lines Sewage lagoon Insecticide storage V					
	Lateral lines Feedyard Abandoned water well Direction from well?					
	Cess pool Livestock pens Oil well/Gas well How many feet?					
		G MATERIALS	FROM TO	PLUGGING	MATERIALS	
	35 10 Jund	V Grand				
	10 c Com	al Gra-	it			
7	7 CONTRACTOR'S OR 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					
ì	Il Contractor's License No. 472		Record was completed	on-(mo/day/year)	under the	
business name of Bourdan Pump Fullell by (signature) 1 but Back						
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.						
reco	orus. visit us at http://www.kuneks.gov/v	acci weil/ilidex.iiliiii.				