W	ATER WELL PLUGGING RECORD Form W	
1	LOCATION OF WATER WELL: Fraction County: Nemaha SW 1/4 NE 1/4 NW 1/4 S	Section Number Township Number Range Number Range Number T 2 S 12 T E W
	Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here 9th & Walnut , Seneca, KS	Global Positioning Systems (GPS) information: Latitude: (in decimal degrees) Longitude: (in decimal degrees) Elevation: Datum: WGS84, NAD83, NAD27 Collection Method:
2	WATER WELL OWNER: KDHE-BER RR#, St. Address, Box #: 1000 SW Jackson Street City, State ZIP Code: Topeka, KS 66612-1367	GPS unit (Make/Model: Digital Map/Photo, Topographic Map, Land Survey Est. Accuracy:
3 W	MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX: N WELL'S STATIC WELL WAS USED Domestic Irrigation Feedlot Industrial	ft. WATER LEVE 33.10ft
5 TYPE OF BLANK CASING USED: Steel RMP (SR) Wrought Fiberglass Other (Specify below) 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: From 3 ft. to 44.62 ft., From ft. to ft., From to ft. What is the nearest source of possible contamination: Septic tank Seepage pit Pit privy Fertilizer storage Watertight sewer lines Sewage lagoon Insecticide storage		
	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 PLUGGING MATERIALS 0 3 Native soils	FROM TO PLUGGING MATERIALS
	3 44.62 Bentonite Grout	MW1
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 7/16/2012 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) 08/10/2012 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		
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