		WATER WELL PLUGGING R	ECORD Form W	WC-5P KSA 82a	a-1 212 ID N	0	
LOCATION OF WATER WELL:		Fraction	Section Nun	nber Township	Number	Range	Number
County: Montgomery		SW 1/4 NE 1/4 Se 1/4	32	325	3	16	(EAN
Distance and direction fr	om nearest town or	city street address of well if loc	ated within city?			_	
2 WATER WELL O'RR #, St. Address, City, State, ZIP Co	Box #-1765 Limes	Cement Company stone Rd. ace, KS 67301	Board of Ag Application	riculture, Division of Number:	Water Resource	es	
3 MARK WELL'S L		4 DEPTH OF WELL 78					<u> </u>
AN "X" IN SECTI	ON BOX:	WELL'S STATIC WATE	ER LEVEL 30	ft.			
NW-NW-	NE	WELL WAS USED AS: 1 Domestic 2 Irrigation 3 Feedlot 4 Industrial	5 Public Water 6 Oil Field Wat 7 Domestic (Le 8 Air Condition	Supply er Supply awn & Garden) ing	9 Dewaterir (10)Monitorin 11 Injection V 12 Other	g Well Well	
sw	SE ^X	Was a chemical / bacteriolo if yes, mo/day/yr sample wa	gical sample submitt	ed to Department?			
s		Water Well Disinfected: Ye	es No .X				
5 TYPE OF BLANK	CASING USED:						
(2) VC 4/	ABS 6 As	ought 7 Fibergla pestos-Cement 8 Concre Was casing pulled?	te Tile	necify below)	If yes, how muc		
6 GROUT PLUG MA	ATERIAL: 1 N	eat cement 2 Cement grou	ut (3)Bentonite	4)Other Topso	oil .		
Grout Plug Interva		Bft. to -3 ft.	From <u>-3</u>	.ft. to	ft., From	to	f
What is the nearest source of possible 1 Septic tank		6 Seepage pit	11 Fuel storag	e	16 Other (specify below)		
2 Sewer lines 3 Watertight sewer lines		7 Pit privy 8 Sewage lagoon	13 Insecticide	12 Fertilizer storage 13 Insecticide storage			
4 Lateral lines 5 Cess pool		9 Feedyard 1 0 Livestock pens	14 Abandoned 15 Oil well/Gas				
Direction from we	ell? N/A	How many	feet? N/A				
FROM TO	PL	UGGING MATERIALS					
0 -3 ft	Topsoil						
-3 ft 78	Bentonite chip	s, hydrated					
	3-DR						
7 CONTRACTOR (mo/day/year) 2/ Water Well Contract	'S OF LANDOWN 24/09 ctor's License No. 66	ER'S CERTIFICATION: The business name of Pratt W	is water well was p and this recon T	olugged under my d is true to the best his Water Well Red	jurisdiction and of my knowled cord was completed	ed was com lge and belie leted on (mo	pleted on ef. Kansas e/day/year)
by (signature)	Steven	July maine of Frank W	en beivice, Mc.		***************************************		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
INSTRUCTIONS: Use	typewriter or ball	point pen. <u>Please press firn</u> as Department of Health an	nly and print clearly	. Please fill in bla	nks, underline	or circle th	e correct

answers. Send top three copies to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1 000 SW Jacks St., Ste. 420, Topeka, Kansas 66612-1367. Telephone: 785/296-5522. Send one to Water Well Owner and retain one for your records.