|  |  | WATER WELL PLUGGING REC   | CORD Form WWC-5F                                | P KSA 82a-1212                           | 2 ID NO                                   |                            |  |
|--|--|---|---|--|---|----------------------------|--|
| 1  | LOCATION OF WATER WELL:  | Fraction  | Section Number                                  | Township N                               | Number Range                              | Number                     |  |
| Cour   | nty: Montgomery<br>Ince and direction from nearest town or                 | 5~145~145~14  | /6  | South:                                   | 32 East                                   | 17 E/W                     |  |
| Dista  | Cherryale US   | city street address of well if locate                                       | ed within city?                                 |  |   |                            |  |
| of the state of th |  |   |   |  |   |                            |  |
| RR #, St. Address, Box #: City, State, ZIP Code :  WATER WELL OWNER: // A f. On a f. Z. // Code // Cherrynale // Kans as Board of Agriculture, Division of Water Resources Application Number:   |  |   |   |  |   |                            |  |
| 3  | MARK WELL'S LOCATION WITH  | 4 DEPTH OF WELL   | ( )   |  |   |                            |  |
|  | AN "X" IN SECTION BOX:<br>N  | WELL'S STATIC WATER   | LEVEL 6t.                                       |  |   |                            |  |
|  |  | WELL WAS USED AS:   |   |  |   |                            |  |
|  | NW   | 1 Domestic  | 5 Public Water Suppl                            |  | Dewatering                                |                            |  |
|  |  | 2 Irrigation<br>3 Feedlot   | 6 Oil Field Water Sup<br>7 Domestic (Lawn &     |  | Monitoring Well Injection Well            |                            |  |
| w-   | E  | 4 Industrial  | 8 Air Conditioning                              |  | Other                                     |                            |  |
| -  | SW SE Was a chemical / bacteriological sample submitted to Department? Yes |   |   |  |   |                            |  |
|  | <u>X</u> s   | Water Well Disinfected: Yes .   | No  |  |   |                            |  |
| TYPE OF BLANK CASING USED:   |  |   |   |  |   |                            |  |
| 5  |  | /rought 7 Fiberglass  | 9 Other (Specify                                | helow)                                   |   |                            |  |
|  |  | sbestos-Cement 8 Concrete   | Tile  | ·····                                    | , how much 16.5                           | 50                         |  |
| 6  | GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other      |   |   |  |   |                            |  |
|  |  |   |   |  |   |                            |  |
| What is the nearest source of possible contamination:  1 Septic tank 6 Seepage pit 1   |  |   | 11 Fuel storage                                 | 11 Fuel storage 16 Other (specify below) |   |                            |  |
| 2 Sewer lines  |  | 7 Pit privy 12 Fertilizer storage<br>8 Sewage lagoon 13 Insecticide storage |   |  | Doine Fiel                                |                            |  |
| <ul><li>3 Watertight sewer lines</li><li>4 Lateral lines</li></ul>   |  | 9 Feedyard 14 Abandoned water well  |   | well                                     | DOLL POSSIBI                              | 'e                         |  |
| 5 Cess pool  |  | 10 Livestock pens   | 15 Oil well/Gas well                            | Con                                      | ion possibl                               |                            |  |
|  | Direction from well? How many feet?  |   |   | are                                      | eas visible                               |                            |  |
| FROM TO PI   |  | JGGING MATERIALS  |   |  |   |                            |  |
| 1  | 16,50 3/8 Bi   | entonite chips  |   |  |   |                            |  |
| Mi   | V-5  |   |   |  |   |                            |  |
| 1.10   |  |   |   |  |   |                            |  |
|  |  |   |   |  |   |                            |  |
|  |  |   |   |  |   |                            |  |
|  |  |   |   |  |   |                            |  |
|  |  |   |   |  |   |                            |  |
| 7  |  | JEDIO GERTIFICATION TO  |   |  |   |                            |  |
| 7  | (mo/day/year)62.6  | TER'S CENTIFICATION: This w   | vater well was plugger<br>and this record is tr | a under my juriso<br>ue to the best of m | inction and was colly<br>knowledge and be | mpleted on<br>lief. Kansas |  |
|  | (mo/day/year)  | he business name of   | Ihis W  | ater Well Record v                       | vas completed on (m                       | 10/day/year)               |  |

INSTRUCTIONS: Use typewriter or ball point pen. <u>Please press firmly</u> and <u>print</u> 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: 785/296-5522. Send one to Water Well Owner and retain one for your records.