WATER WELL PLUGGING RECORD	Form WWC-5P K	SA 82a-1212	ID NO.		
	Fraction	Section Number	Township Number	Range Number	
County: Labette	SE ¼ SW ¼ SE	16	33S	21E	
Distance and direction from nearest town or city street address of well if located within city?					
902 6 th St. Oswego, KS					
			System (decimal degrees,	min. of 4 digits)	
DD# St. Address Dov. #. D.O. Dov. CCZ		Latitude:			
RR#, St. Address, Box #: P.O. Box 667		Longitude:			
City, State, ZIP Code: Independence, KS 67301		Elevation:			
		Data Collection Method:			
3 MARK WELL'S LOCATON	4 DEPTH OF WELL		ft. MW6		
WITH AN "X" IN SECTION					
BOX:	WELL'S STATIC W	ATER LEVEL	ER LEVEL ft.		
	NEXT WAS TROPE TO				
N	N WELL WAS USED AS:				
1 Domestic 5 Public Water Supply 9 Dewatering					
2 Irrigation 6 Oil Field Water Supply (10) Monitoring					
W 3 Feedlot 7 Domestic (Lawn & Garden) 11 Injection Well					
sw se 4 Industrial 8 Air Conditioning 12 Other					
Was a chemical/bacteriological sample submitted to Department? Yes No X					
5 TYPE OF BLANK CASING USED: 1 Start 2 RM (P (SR) 5 Wrought 7 Fiberpless 0 Other (crossife heless)					
1 Steel 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (specify below) 2 PVC 4 ABS 6 Asbestos-Cement 8 Concrete Tile					
21 VC 4 ADS 0 ASDESIOS-CENTOR 0 CONCICIO THE					
Blank casing diameter 2 in. Was casing pulled? Yes X No If yes, how much 3 feet					
Casing height above or below land surface in.					
6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other Concrete: 0-0.5 feet					
Soil: 0.5-3 feet					
Grout Plug Intervals: From 3 ft. to 12.68 ft., From ft. to ft., From ft. to ft.					
What is the nearest source of possible contamination:					
1 Septic tank 6 Seepage pit 11 Fuel storage 16 Other (specify below)					
2 Sewer lines 7 Pit privy 12 Fertilizer storage					
3 Watertight sewer lines 8 Sewage lagoon 13 Insecticide storage					
4 Lateral lines 9 Feedyard 14 Abandoned water well Direction from well?					
5 Cess pool 10 Livestock pens 15 Oil well/Gas well How many feet?					
FROM TO PLUGGING M	MATERIALS F	OM TO	PLUGGING MA	ATERIALS	
0 0.5 Cone			-200011101111		
	Soil				
3 12.68 Bento	nite				
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was					
completed on (mo/day/year) 8/27/08 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 757 This Water Well Record was completed on (mo/day/year) 8/29/08 under the					
Well Contractor's License No. 757 . This Water Well Record was completed on me/day/year) 8/29/08 under the business name of Larsen and Associates, Inc. by (signature)					
INSTRUCTIONS: Please fill in blanks 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 6612-1367. Telephone:					