WATER WELL PLUGGING RECORD FORM WWC-SP KSA 82a-1212 ID NO.									
1	LOCATION County: LA		ER WELL:	Fraction NE 1/4 SW 1	4 SE 1/4	1/4	Number 30	Township Number T 34 S	20 ▼ E
	Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here					Global Positioning Systems (GPS) information: Latitude: 37.051789 (in decimal degrees) Longitude: -95.255601 (in decimal degrees) Elevation:			
DRILLED 5@300'						Datum: WGS84, NAD83, NAD27 Collection Method:			
2	WATER WELL OWNER: KEN GRAVES RR#, St. Address, Box #: 1566 US HWY 166 City, State ZIP Code: BARTLETT, KS					GPS unit (Make/Model: MAGELLEN Digital Map/Photo, Topographic Map, Land Survey Est. Accuracy: 3 m, 3-5 m, 5-15 m, > 15 m			
3 W	MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX: NW								
5 TYPE OF BLANK CASING USED:									
Steel RMP (SR) Wrought Fiberglass Other (Specify below) Asbestos-Cement Concrete Tile N/A Blank casing diameter in. Was casing pulled? Yes No If yes, how much in. Casing height above or below land surface in.									
Grout Plug Intervals: From 0 ft. to 300 ft., From ft. to ft., From to ft. What is the nearest source of possible contamination: Septic tank Seepage pit Fuel Storage Fertilizer storage Watertight sewer lines Sewage lagoon Lateral lines Cess pool Livestock pens Oil well/Gas well How many feet?									
	FROM	TO	PLUG	GING MATE	RIALS	FROM	TO	PLUGGING	MATERIALS
	0	10	YELLOW C						
	10	40	BLUE SHA						
	40	80	GRAY SHA			*****			
	80								
	100	120	GRAY SHAI						
	120	300	BLUE SHAL	.E					
7	CONTRAC	TOP'S O	P LANDON	NED'S CEE	TIFICATION	V. Thie w	ater well v	vae nlugged under m	v jurisdiction and was
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 2/24/12 and this record is true to the best/of my knowledge and belief. Kansas Water Well Contractor's License No. 812 This Water Well Record was completed on (mc/day/year) 8/07/12 under the business name of Environmental Loop Service, 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 Copy									