				WATER WELL PLUGGING RI	ECORD F	form WWC-5P	KSA 82a-12	212 ID N	10		
1	LOCAT	ION OF WAT	ER WELL:	Fraction	Section	Number	Township	Number	Range	Num	ber
Со	County: Brown			WW45W45W4	/3		4		/	16	E/W
Dis	tance and	direction from	nearest town or o	city street address of well if local		-					
	rom	Merc	ien Kan	IMILE East	34 mil	e South	1 -200 F	BST #	PPROX	<u>,                                    </u>	
2	WATER	R WELL OWN	ER: Pau	IL LUESKE Kestrer Rd							
nn #, St. Address, box #:				ton KS 66439 Application Number:							
MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:				depth of well							
		3		WELL WAS USED AS:							
w	X NW	,	- NE	1 Domestic 2 Irrigation 3 Feedlot 4 Industrial	6 Oil Fie 7 Dome	c Water Supply eld Water Supp estic (Lawn & Conditioning	ply Garden)	9 Dewater 10 Monitorin 11 Injection 12 Other	ng Well	1.50	
	SW SE			Was a chemical / bacteriological sample submitted to Department? Yes							
		S		Water Well Disinfected: Ye	s No	) :					
5	TYPE	OF BLANK CA	ASING USED:			· · · · · · · · · · · · · · · · · · ·					
-	1 Stee		` '	ought 7 Fibergla		ther (Specify b	pelow)				
		casing diamet	er <b>g</b> .))	bestos-Cement 8 Concre Was casing pulled?	Yes	No	<b>.K</b> If y	res, how mu	ıch		
<u> </u>				rface			- · · ·	76.4.200			
6	Grout I	T PLUG MATI Plug Intervals:	From	eat cement 2 Cement grown ft. to			Other ft.,			to	
What is the nearest source of possible			source of possible		4.6						
1 Septic tank 2 Sewer lines				<ul><li>6 Seepage pit</li><li>7 Pit privy</li></ul>		l storage tilizer storage			ecify below)	LL.	
3 Watertight sewer lines 4 Lateral lines			er lines	<ul><li>8 Sewage lagoon</li><li>9 Feedyard</li></ul>		<ul><li>13 Insecticide storage</li><li>14 Abandoned water well</li></ul>					
5 Cess pool				10 Livestock pens	15 Oil v	15 Oil well/Gas well					
	Directi	ion from well?	East	How many	feet?	10'					
	FROM	то	PL	UGGING MATERIALS							
	Ø 3	//	Bente	em/te							
	11	ړ	· '	icted Chay							
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	<del></del>		0.070			f			,		
				*							
7	\A/a+a= \	Mall Cantuanta	ula Liaanaa Nia	ER'S CERTIFICATION: This		TL:- \A/	W-II D		-1-41 /-	/-	ر. ـ ـ ـ <b>١</b>
70	by (sig	nature)	aul Jues	e business name of							

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.