	WATER W	VELL PLUGGING RECORD	Form WWC-5P	(SA 82a-1212	
1 LOCATIO	ON OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County:	Post	5£1/45W1/45£1/4	22	6 5	7 E.
Distance and direction from nearest town or city street address of well if located within city? From Pls but Go North 6 Mils on Spring Crit Rd. 2 WATER WELL OWNER: Patt RWO # 2					
RR#, St. Address, Box #: 309 Secon ST. Board of Agriculture, Division of Water Resources City, State, ZIP Code: OLSburg, HS 66502 Application Number: MARK WELL'S LOCATION WITH AN UNU IN SECTION BOY: 4 DEPTH OF WELL					
MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX: N WELL'S STATIC WATER LEVEL					
W	N E	1 Domestic 2 Irrigation	6 Dil Field Water 9	Supply 10 Monitor Only 11 Injection 12 Other	ing Well on Well
s	Was a chemical/bacteriological sample submitted to Department? YesNo Water Well Disinfected: Yes. # No				
5 TYPE OF BLANK CASING USED:					
1 Steel 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (specify below) 2 PVC 4 ABS 6 Asbestos-Cement 8 Concrete Tile Blank casing diameter					
GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other					
1 Sep 2 Sev 3 Wat 4 Lat	s the nearest source o ptic tank wer lines tertight sewer lines teral lines ss Pool	6 Seepage pit 7 Pit privy 8 Sewage lagoon 9 Feedyard	11 Fuel storage 12 Fertilizer storag 13 Insecticide stora 14 Abandoned water w 15 Oil well/Gas well	16 Other (s ge age well	specify below)
Direction from well? How many feet?					
FROM	TO PLI	UGGING MATERIALS			,
Ø	3 Compo	with Clay			
3	39 Benjar	<i>siTe</i>		/	
39	90 Chlorin	noted Sands	$\setminus^{l_{p_{D}}}$		
			_ \ /		
on (mo/ Water 	/day/year)	CERTIFICATION: This water and this recornse No	d is true to the bes This Water Well	st of my knowledge a Record was complete	and belief. Kansas ed on (mo/day/year)
underline Bureau of	or circle the correct	r ball point pen. <u>Pleas</u> answers. Send top thre 66620-0001. Telephone	e copies to Kansas D	Department of Health	and Environment,