WATER WELL PLUGGING RI	ECORD Form WWO	C-5P KSA 82a-12			
1 LOCATION OF WATER WELL: County: Clay	Fraction NE 1/4 NE 1/4 SE	Section Number	Township Number	Range Number	
Distance and direction from nearest town or city street address of well if located within city?					
1/2 miles south and I mile east of Clay Center					
2 WATER WELL OWNER: Clobal Positioning Systems (decimal degrees, min. of 4 digits Latitude: Latitude:					
RR#, St. Address, Box #:	Prairie Circle Rd	Longitude:Elevation:			
City, State ZIP Code: Clay Center KC 17437 Datum:					
Data Collection Method:					
3 MARK WELL'S LOCATION 4 DEPTH OF WELL 14 ft. WITH AN "X" IN SECTION					
BOX:	BOX: WELL'S STATIC WATER LEVEL dry ft				
	WELL WAS USED AS:				
NW NE	NW NE 1 Domestic 5 Public Water Supply 9 Dewatering				
	2 Irrigation	6 Oil Field Water Supply 10 Monitoring			
W E	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? YesNo					
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 48 in. Was casing pulled? Yes No If yes, how much					
Casing height above or below land surface in.					
Grout Plug Intervals: From 4/2 ft. to 5 ft., From ft. to ft., From 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 PLUGO O 4½ Soil	ING MATERIALS	FROM TO	PLUGGING MA	TERIALS	
41/2 5 Bento	nite				
5 14 Subsc					
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No This Water Well Record was completed on (mo/day/year) under the business name of Post					
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: 785/296-5522. Send one to Water Well Owner and retain one for your records. Visit us at http://www.kdheks.gov/geo/waterwells.					