W	ATER WELL PLUGGING I	RECORD Form WY	WC-5P	KSA 8	2a-1212 ID NO.		
1	LOCATION OF WATER WELL: County: Leavenury: V	Fraction SEUSE 4 NE 4 SE	Section	n Number 35	Township Number	Range Number	
	Street/Rural Address of Well Location;	if unknown, distance &	Global P	ositioning	Systems (GPS) inform	nation:	
	direction from nearest town or intersection: If at owner's address, check here			Latitude: 390/3'46.84 \ (in decimal degrees)			
	check here 14517 147 1			Longitude: 940551003 W (in decimal degrees) Elevation: 285 Weber			
			Datum:	□ wc	3S84, NAD83,	□ NAD27	
	32	13.000	Collection Method:				
2	RR#, St. Address, Box #: City, State ZIP Code: Digital Map/Photo, Topographic Map, Land Surv Est. Accuracy: < 3 m, 3-5 m, 5-15 m, > 15						
3	MARK WELL'S LOCATION 4 DEPTH OF WELL GO ft.						
	BOX:	N WELL'S STATIC WATER LEVEL 50 ft					
		WELL WAS USED AS:					
	NW NE Domestic Public Water Supply Dewatering						
	Irrigation Oil Field Water Supply Monitoring						
W	Feedlot Domestic (Lawn & Garden) Injection Well						
	SW SE Industrial Air Conditioning Other						
	Was a chemical/bacteriological sample submitted to Department? Yes No V						
5 TYPE OF BLANK CASING USED:							
	Steel RMP (SR) Wrought Fiberglass Other (Specify below)						
	Steel RMP (SR) Wrought Fiberglass Concrete Tile Concrete Tile						
	Blank casing diameter 36 in. Was casing pulled? Yes No lifyes, how much						
	Casing height above or below land surfacein.						
the state of the s							
	Treat cement grout - Bentonite - Other						
Grout Plug Intervals: From 10 ft. to 8 ft., From ft. to ft., From to ft.							
	What is the nearest source of possible contamination:						
	Septic tank Seepage pit Fuel Storage Other (specify below)						
	Sewer lines Pit privy Fertilizer storage Watertight sewer lines Sewage lagoon Insecticide storage						
	Lateral lines Feedyard Abandoned water well Direction from well?						
	Cess pool Livestock pens Oil well/Gas well How many feet?						
	FROM TO PLUG	GING MATERIALS	FROM	ТО	PLUGGING	MATERIALS	
	60 40 Clear	1 Gravel/Soul			1 LOGGING	WATERIALS	
	40 10 Clay						
	10 8 Bensto	wte/Gnot					
	8 0 Top 9	36.C					
ŀ					The state of the s		
7 C	ONTRACTOR'S OR LANDOW	NER'S CERTIFICATIO	N. Thia	ntan11			
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 5/18/13 and this record is true to the best of my knowledge and belief. Kansas Water Well Power well							
husiness name of the land well kecord was completed on (mo/day/year) 5/30/13 \(\rightarrow \text{under the } \)							
by (signature) for the filterial way							
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							
	ds. Visit us at http://www.kdheks.go		296-5524.	Send one to	Water Well Owner an	d retain one for your	
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