	352	8600	WATER WELL PLUGGING RECO				ECORD	RD Form WWC-5P KSA8				2a-1212 ID NO.			TW1-06		
П	LOCATION OF WATER WELL:			Fraction					Section Number			Township Number			Γ	Range	Number
Cou	ntv:	Detterm		SE.	474 N	IE 4/4	NIVA/	.,,		0.7		Т	٠,	s	R	-	(E) w
\vdash		Pottawa direction fro	n nearest town	1			NW ² of well			27 city?			9		<u> </u>	9	
1	Approximately 3 3/4 miles north and 1 mile east of St. George																
O MATER WELL CHARED.																	
\vdash	RR#, St. Address, Box # P.O. Box 233 Board of Agriculture, Division of Water Resources City, State, ZIP Code Wamego, KS 66547 Application Number:																
3 MARK WELL'S LOCATION WITH 4 DEPTH OF WELL 124 ft																	
AN "X" IN SECTION BOX: WELL'S STATIC WATER LEVEL 65 ft.																	
ſ		N		WELL WAS USED AS:													
		x		1 Domestic				5 Public Water Supply				9 Dewatering					
	N W				2 Irrigation				6 Oil Field Water Supply				10 Monitoring Well				
$ _{w} $				_	3 Fee	dlot			7 Domestic (Lawn & Garden)				11 Injection Well			ell	
"				E	4 Ind	ustrial			8 Air C	onditioning)			12 Other			
S W S E Was a chemical / bacteriological sample submitted to Department?Yes										No	√						
	If yes, mo/day/yr sample was submitted											X					
		S		- 1						No							
5	TVPF (OF BLANK CA	SING USED:						9								
لــّا		Steel	3 RMP (SF	٦)	5 Wro	uaht			7 Fib	erglass			9 Oth	er (Specify	belo	w)	
		PVC	4 ABS	,		_				crete Tile						,	
	2 PVC 4 ABS 6 Asbestos-Cement 8 Concrete Tile Blank casing diameter 5 in. Was casing pulled? Yes No If yes, how much																
	Casing height above or below land surface 48 in.																
6	GROUT	PLUG MATI	ERIAL: 1 I	Neat Cer	ment	2	Cemen	t grout	3	Bentonite	• <	4 Ot	her	>Bentoni	te H	oleplug	
Grout Plug Intervals: From ft. to ft., From ft. to ft. From 80 ft. to 4 ft.														4 ft.			
			ssible contamination:														
	•	otic tank						1 Fuel storage				16 Other (specify below)					
		ver lines		•	• •				2 Fertilizer storage				None known				
		tertight sewer eral lines							Insecticide storage Abandoned water well					CIGIOWII			
		s Pool		0 Lives	•	ns			well/Gas		511						
Direction from well? How many feet?																	
FF	ROM	то	Р	LUGGIN	IG MAT	ERIAL	S		1								
	124	80	Chlorinate	ed San	d				1								
	80	4	Holeplug														
	4	0	ed Soil					7									
									1								
									1								
									1								
							•		1								
7	CON	RACTOR'S	OR LANDO	WNER'	S CER	TIFIC	ATION:	This w	⊒ vater we	ell was nlu	uaaed i	under n	ny iur	isdiction a	nd w	as com	oleted
	CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 07-26-07 and this record is true to the best of my knowledge and belief. Kansas																
			actor's Licens		185							Record	was	completed	on	(mo/day/	year)
		07-30-07	under th	e busin	ess na	ame of	Clar	We We	II & Eq	uipment,	, Inc.				••••		
	by (sig	gnature)		an we	1	1/1	10	1	<u> </u>								

INSTRUCTIONS: Use typewriter or ball point 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 & Environment, Bureau of Water, Topeka, Kansas 66620-0001. Telephone: 785/296-3565. Send one to Water Well Owner and retain one for your records.