				٧	VATER WELL PLUGGING RE	CORD Form WWC-5P	KSA 82a-1212 ID 1	١٥		
1	LOCAT	ION OF WAT	ER WELL:	T	Fraction	Section Number	Township Number	Range Number		
					14 SW 14 SE 14	4	12	7		
County: Lincolv 45W 45E 4 Distance and direction from nearest town or city street address of well if located within city?										
2	WATER	R WELL OWN	~~	rry	Liggett V Minnesota					
City, State, ZIP Code : Tescott, KS 67484 Application Number:										
3	MARK WELL'S LOCATION WITH 4 DEPTH OF WELL 18. 10. If.									
	AN "X" IN SECTION BOX: WELL'S STATIC WATER LEVEL									
W					WELL WAS USED AS:					
	NW	NWNE			Domestic 2 Irrigation	5 Public Water Supply6 Oil Field Water Supply				
				E	3 Feedlot	7 Domestic (Lawn & C	Garden) 11 Injection	Well		
					4 Industrial	8 Air Conditioning		✓		
	SW SE				Was a chemical / bacteriological sample submitted to Department? Yes					
			×		Water Well Disinfected: Ye	s X No				
		S								
5	5 TYPE OF BLANK CASING USED:									
	1 Stee 2 PVC			Wrou	ight 7 Fibergla stos-Cement 8 Concret	, , ,	oelow)			
Blank casing diameter in. Was casing pulled? Yes No If yes, how much										
6	6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Sentonite 4 Other									
	Grout Plug Intervals: From									
What is the nearest source of possible contamination: 1 Septic tank 6 Seepage pit 11 Fuel storage 16 Other (specify below)										
2 Sewer lines3 Watertight sewer lines				7 Pit privy 8 Sewage lagoon	12 Fertilizer storage 13 Insecticide storage					
4 Lateral lines 5 Cess pool					9 Feedyard 10 Livestock pens	14 Abandoned water 15 Oil well/Gas well				
Direction from well? South How many feet?										
FROM		то		PLU	GGING MATERIALS					
0		0.75	Conc	ret	e Cap					
0	,75'	2.5'	Soi	/						
			_		\ .					

FROM	то	PLUGGING MATERIALS		
D	0.75'	Concrete Cap		
0.75'	2.5'	Soi/		
2.5'	3,0'	Bentonite		
3.0'	30.75	Subsoil		
30.75	36'	Sand		

CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) Sept. 28, 200.7 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) Det. 1, 200.7 under the business name of by (signature)

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 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.