\mathbf{W}	ATER WELL PLUGGING RI	ECORD 1	Form WWC	-5P	KSA 82a-12	12 ID NO	<u>. </u>			
1	County: Ell. S Distance and direction from nearest to						umber	Range Nu	mber E W	
	Distance and direction from nearest to	wn or city stre	eet address of w	ell if loc	ated within city?					
	105 W 13th									
2	WATER WELL OWNER: FIRST CARE CLIN			Global Positioning Systems (decimal degrees, min. of 4 digits Latitude:						
		W13th		Longitude:Elevation:						
	City, State ZIP Code:	sks	47601	Datum:	ollection Method					
3	MARK WELL'S LOCATION WITH AN "X" IN SECTION	4 DEPTH	OF WELL	38' L	ft	BASEME	NT			
	BOX:	WELL'	S STATIC WA	TER LE	VEL	ft				
	N	WELL	WAS USED AS	S:	-					
	NW NE	1_Dome	estic	§ Publi	ic Water Supply	9	Dewat	ering	* '	
W	T.	2 Irriga		6 Oil I	Field Water Supp	oly 10	Monit			
VV	E	3 Feedl			nestic (Lawn & C			ion Well		
	SW SE	4 Indus	strial	8 Air	Conditioning	12	Other			
	S	Was a c	hemical/bacterio	ological	sample submitte	d to Departme	nt? Yes	S No _		
5	TYPE OF BLANK CASING USED									
	1 Steel 3 RMP (SR) 5 W 2 PVC 4 ABS 6 As	rought sbestos-Cemer	7 Fibers	glass rete Tile		(Specify below	v)			
	Blank casing diameter in. Was casing pulled? Yes No X If yes, how much Casing height above or below land surface in.									
		11acc _ 6 _ C								
6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other										
	Grout Plug Intervals: From 18 ft. to 1 ft., From 1 ft. to 0 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 13 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?									
		ING MATER	IALS F	FROM	ТО	PLUGGIN	IG MAT	TERIALS		
	38'4" 18 Cra									
		onite ne NT								
	. 8	NE WI								
7	CONTRACTOR'S OR LANDOWN	ED'S CEDT	TEICATION.	This		.1			1	
com	CONTRACTOR'S OR LANDOWN pleted on (mo/day/year) 1-27-	I R CERT	and this record	is true t	to the best of m	otuggea unaer v knowledge	my jui and beli	risdiction ar ief. Kansas	d was Water	
We	l Contractor's License No	This V	Water Well Reco	ord was o	completed on (m	o/day/year) _ &	3-19	- 1 une	der the	
busi	ness name of QQ	·	t	y (signa	ture)					
INS	TRUCTIONS: Use typewriter or ball	point pen. Ple	ease press firmly	y and pri	nt clearly. Pleas	se fill in blanks	s, under	line or circle	the	
corr	ect answers. Send top three copies to I	Kansas Depart	ment of Health	and Envi	ironment, Burea	u of Water, Ge	ology S	Section, 1000	SW	
reco	son St., Ste. 420, Topeka, Kansas 666 ords. Visit us at http://www.kdheks.gov	12-1367. Tele v/geo/waterwe	epnone: 7/85/290 ells.	b-5522.	Send one to Wat	ter Well Owne	r and re	tain one for	your	