\mathbf{W}	ATER WELL PLUGGING RE	ECORD Form W	WC-5P	KSA 82a-121	2 ID NO. L	MW-18		
1	LOCATION OF WATER WELL: County: E1173	Fraction NW 1/4 NW 1/4 N	Sect	ion Number	Township Number	Range Num		
1	Distance and direction from nearest to	wn or city street address	s of well if loo	cated within city?				
	2000 E. 13th St. Hays, KS 67601							
2	WATER WELL OWNER: Thriff Distribution Global Positioning Systems (decimal degrees, min. of 4 digitation)							
	RR#, St. Address, Box #: 2000 E, 13th Si			Longitude:				
	City, State ZIP Code: Hays	, KS 67601	Datum	: Collection Method:				
3	MARK WELL'S LOCATION	4 DEPTH OF WELL 33.20 ft.						
	WITH AN "X" IN SECTION BOX:	WELL'S STATION	WATER LE	VEL 24.09	ft			
	X	WELL WAS USI	ED AS:					
	NW NE	1 Domestic	5 Publ	lic Water Supply	9 Dew	atering		
W	7 E	2 Irrigation 3 Feedlot		Field Water Supplemestic (Lawn & G		nitoring ection Well		
	SW SE	4 Industrial		Conditioning		er		
	Was a chemica/bacteriological sample submitted to Department? Yes No							
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 in. Was casing pulled? Yes No If yes, how much 3.5							
	Casing height above to below and surface in.							
6	Trouve ventent 2 content grout 5 Bentomite							
	Grout Plug Intervals: From 1.5 ft. to 33.2 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?							
		ING MATERIALS A (Send	FROM	ТО	PLUGGING M	ATERIALS		
		onide Chips						
_	CONTRACTORS OR LANDOWN	YEDAG CEDTUCATI	ON TI	11	1 1			
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) to /2015 under the								
bus	Il Contractor's License No	This Water Wel	l Record was by (signate)	completed on (mo	o/day/year) <u> </u>	6 /2016 und	der the	
INSTRUCTIONS: Use typewriter or ballpoint pen. Please press firmly and print clearly. Please all 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.								