				V	ATER WELL PLUGGING F	1ECOND F	OIII WWWC-5F	NSA 02a-	1212 131		
1	LOCAT	ION OF WAT	ER WELL:		Fraction	Section	Number	Township	Number	Range	Number
نــ برد	ounty: Doyalas			N	NEVANNVA 14		14			20	E/W
Dist	ance and	direction from	nearest town	or city	street address of well if loo	cated within cit	y?				
NE of Baldwin Xs.  2 WATER WELL OWNER: Denny Johnson											
2	WATER	R WELL OWN	IER: Deng	Je	phnson						
	RR #, St City, Sta	. Address, Bote, ZIP Code	) x #: 185 	Idw	N. 700 Rd  Board of Agriculture, Division of Water Resources  Application Number:						
3	MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:				4 DEPTH OF WELL						
		N									
	X				WELL WAS USED AS:						
\	NW	· — /	NE	1	1 Domestic 2 Irrigation		c Water Supply eld Water Supp		9 Dewater 10 Monitori		
				_	3 Feedlot	7 Dome	estic (Lawn & C		11 Injection	Well	
W				E	4 Industrial	8 Air Co	onditioning		12 Other		
	SW	1	SE		Was a chemical / bacteriol	submitted to D	epartment? Ye	s	No		
					If yes, mo/day/yr sample w	as submitted	<b>/</b>				
L		S		_	Water Well Disinfected:	res No	·				
TYPE OF BLANK CACING LICED:											
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											
6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other											
Grout Plug Intervals: From 4.5 ft. to 5.0 ft., From ft. to ft., From to ft.											o ft.
	What is	the nearest	source of pos	sible c	ontamination:						
Septic tank     Sewer lines				<ul><li>6 Seepage pit</li><li>7 Pit privy</li></ul>		11 Fuel storage 16 Other (specify below) 12 Fertilizer storage					
3 Watertight sewer lines				8 Sewage lagoon	13 Inse	13 Insecticide storage					
<ul><li>4 Lateral lines</li><li>5 Cess pool</li></ul>				9 Feedyard  O Livestock pens		14 Abandoned water well 15 Oil well/Gas well					
		•	All								
Direction from well?											
FROM TO P			PLUC	GGING MATERIALS							
Grand 4.51 Tops		لأندن									
4.51		5.01	Bent	bu i	ta						
5'0		15.51	54550								
15.5		16	Clear	A	ick						
/-			<u> </u>								
CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed (mo/day/year)											
Water Well Contractor's License No											no/day/year)
	ير by (sig	nature)	unde	r the	Kackley	YARWE	CAC GVC/	. <del> </del>			
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, K	ansas 6661	2-136	7. Telephone: 785/296-5	522. Send or	ne to Water V	Vell Owner a	nd retain on	e for your r	ecords.