		WATER WELL PLUGGING RI	ECORD Form WWC-5P	KSA 82a-1212 ID N	0	
1	LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number	
Cou	unty: Saline	SW 14 NE 14 NW 14	13	14	3 EW	
	tance and direction from nearest town 307 E. Walnut, Salina		ated within city?			
2		mer Sherbert	·			
	RR #, St. Address, Box #: City, State, ZIP Code: 618 E. Republic Board of Agriculture, Division of Water Resources Application Number:					
3	MARK WELL'S LOCATION WITH	4 DEPTH OF WELL	4 DEPTH OF WELL35 ft.			
	AN "X" IN SECTION BOX: N	R LEVEL Unk ft.	EVELUnk ft.			
	WELL WAS USED		3:			
}	NW X NE	1 Domestic	5 Public Water Supply			
		2 Irrigation 3 Feedlot	6 Oil Field Water Supp 7 Domestic (Lawn & G			
W		E 4 Industrial	8 Air Conditioning		soil vapor extr.	
-		SE Was a chemical / bacteriological sample submitted to Department? Yes				
		Water Well Disinfected: Yes NoX				
	S	S Water Well Disinfected: Yes				
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 diameter4 in Casing height above or below land	. Was casing pulled?	Yes	Drilled If yes, how mu	out to 20 t	
	····	Neat cement		Other		
6		0ft. to1 ft.		o35 ft., From		
	What is the nearest source of poss	ible contamination:		1		
Septic tank Sewer lines		6 Seepage pit 7 Pit privy	11) Fuel storage 12 Fertilizer storage	16 Other (spe	cify below)	
3 Watertight sewer lines		8 Sewage lagoon	13 Insecticide storage)		
4 Lateral lines 5 Cess pool		9 Feedyard 10 Livestock pens	14 Abandoned water15 Oil well/Gas well	well		
	Direction from well?Onsit	e How many	feet?		·	
FROM TO PLU		PLUGGING MATERIALS				
0 1 Cement		crout	sv6			
		ite (11")				
		ite (4")				
	33 20.00.	200 (1)				
			GeoCore	#967		
7	CONTRACTOR'S OF LANDOW	NER'S CERTIFICATION: This	water well was plugged	d under my jurisdiction a	and was completed on	
(mo/day/year)1.2/.29/.2004						
	1/4/2005under	the business name ofGe	oCore Inc.			
	by (signature)					
INS	STRUCTIONS: Use typewriter or b	pall point pen. <u>Please press fir</u>	mly and print clearly. Plea	ase fill in blanks, underlin	ne 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.