KSA 82a-1212

			WATER WELL FLOGGING F	RECORD Form WWC-5F	N3A 02a-1212 10		
1 LOCATION OF WATER WELL:			Fraction	Section Number	Township Number	Range Number	
County: Saline			NW% NE % NW %	13	14	3E(W)	
		nearest town or o	ity street address of well if loc	ated within city?			
	R WELL OWN	120 C	Perney Santa Fe	De and of Agricultur	a Division of Water Resour	roce	
	City, State, ZIP Code : Salina, KS 67401 Board of Agriculture, Division of Water Resources Application Number:						
MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX: AN "X" IN SECTION BOX: WELL'S STATIC WATER LEVEL 36.96 ft.							
	N						
	ζ		WELL WAS USED AS:				
W	/	NE E	1 Domestic 2 Irrigation 3 Feedlot 4 Industrial	5 Public Water Supply6 Oil Field Water Supply7 Domestic (Lawn & Caste Conditioning)	ply 10 Monitor Garden) 11 Injection	ring Well	
Was a chemical / bacteriological sample submitted to Department? Yes						No X	
	S		Water Well Disinfected: Y	esNoX			
5 TYPE OF BLANK CASING USED:							
1 Stee (2) PVC	3 RM 3 AB	IP (SR) 5 Wro S 6 Asb	pught 7 Fibergi pestos-Cement 8 Concre	ete Tile			
Blank (Casing	casing diamet g height above	er2 in. e or below land su	Was casing pulled?	Yes No in.	X If yes, how m	nuch	
0	T PLUG MATI		eat cement 2 Cement gro 0 0.5 to ft	out 3Bentonite 4	Other Concrete 40.4 to ft., From	to ft	
	_	source of possible					
2 Si 3 W 4 La	eptic tank ewer lines /atertight sewe ateral lines ess pool	er lines	6 Seepage pit 7 Pit privy 8 Sewage lagoon 9 Feedyard 10 Livestock pens	11 Fuel storage 12 Fertilizer storage 13 Insecticide storage 14 Abandoned water 15 Oil well/Gas well		ecify below)	
	·			y feet?			
FROM	то		JGGING MATERIALS				
0	0.5	Concrete					
0.5 3	3 40.4	Bentonite Bentonite					
				MW1			
				GeoCore #1	242		
7 CONTI (mo/da Water V	RACTOR'S (y/year)	OF LANDOWNE 10/13/200	B'S CERTIFICATION: Thi 527	s water well was plugged	d under my jurisdiction ue to the best of my know later Well Record was cor	and was completed on ledge and belief. Kansas npleted on (mo/day/year)	
	11/4/200 nature)	5under the	e buşiness name ofG	eoCore Inc.			
			point pen. Please press fin as Department of Health a	rmly and print clearly. Ple	ase fill in blanks, underl	ine or circle the correct	

St., Ste. 420, Topeka, Kansas 66612-1367. Telephone: 785/296-5522. Send one to Water Well Owner and retain one for your records.