	WATER WELL PLUGGING R	ECORD Form WWC-5P	KSA 82a-1212 ID N	NO	
1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number	
County: Saline	NE 14 NW 14 NE 14	26	14 S	3 B (₩)	
Distance and direction from nearest town or city street address of well if located within city?					
1842 Hageman, Salina					
2 WATER WELL OWNER: C.L. Clark Real Estate					
RR #, St. Address, Box #: 1842 Hageman Board of Agriculture, Division of Water Resources					
City, State, ZIP Code : Salina, KS 67401 Application Number:					
MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX: 4 DEPTH OF WELL					
N N	WELL'S STATIC WATER LEVEL34 ft.				
X	WELL WAS USED AS:				
NW NE NE	1 Domestic	5 Public Water Supply	9 Dewater	ing	
	2 Irrigation 3 Feedlot	6 Oil Field Water Supp7 Domestic (Lawn & G			
W	4 Industrial	8 Air Conditioning			
Was a chemical / bacteriological sample submitted to Department? Yes					
SW SE If yes, mo/day/yr sample was submitted					
S	Water Well Disinfected: Yes No				
TYPE OF BLANK CASING USED:					
1 Steel 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (Specify below) ● PVC 4 ABS 6 Asbestos-Cement 8 Concrete Tile					
Blank casing diameter2 in. Was casing pulled? Yes No					
Casing height above or below and surface					
6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout ● Bentonite 4 Other					
Grout Plug Intervals: From1 ft. to40.1 ft., From ft. to ft., From ft. to ft., From ft.					
1 Septic tank 6 Seepage pit 11 Fuel storage 16 Other (specify below)					
2 Sewer lines	7 Pit privy	12 Fertilizer storage	٠,		
3 Watertight sewer lines 4 Lateral lines	8 Sewage lagoon 9 Feedyard	13 Insecticide storage14 Abandoned water v	vell		
5 Cess pool	10 Livestock pens	15 Oil well/Gas well			
Direction from well? How many feet?					
FROM TO PL	UGGING MATERIALS				
0 1 Native soil		MW11			
1 40.1 Bentonite (2")	1 40.1 Bentonite (2") KDHE #U5 085 00245				
		GeoCore #1386			
	70.00				
7 CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on					
(mo/day/year)					
Water Well Contractor's License No					
by (signature)					
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, Kansas 66612-1367. Telephone: 785/296-5522. Send one to Water Well Owner and retain one for your records.					