$\mathbf{W}_{i}$	ATER WELL PLUGGING RI	ECORD Form WWO	C-5P KSA 82a-121	12 ID NO.		
1	LOCATION OF WATER WELL: County: SALNE	Fraction SW 1/4 NE	Section Number 34	Township Number	Range Number	
Distance and direction from nearest town or city street address of well if located within city?						
	in city limits - CORNER Of Magnelia St. + I135					
2	WATER WELL OWNER: City of Solida Global Positioning Systems (decimal degrees, min. of 4 c					
	RR#, St. Address, Box #: Co Smory Hill LC City, State ZIP Code:		Latitude: Longitude: Elevation: Datum:			
	City, State ZIP Code:	VA. KS 67401	Data Collection Method	l:		
3						
	WITH AN "X" IN SECTION					
	BOX: WELL'S STATIC WATER LEVEL 18. ft					
	WELL WAS USED AS:					
	NW NE 1 Domestic 5 Public Water Supply 9 Dewatering					
		2 Irrigation	6 Oil Field Water Supp	oly 10 Moni	toring	
W		3 Feedlot 4 Industrial				
					_	
	Was a chemical/bacteriological sample submitted to Department? YesNo					
5	S 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					
	Casing height above or below land surface in.					
6	GROUT PLUG MATERIAL:  1 Neat cement 2 Cement grout 3 Bentonite 4 Other  Grout Plug Intervals: From 3 ft. to 53 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 4 Lateral lines 9 Feedyard 14 Abandoned water well 5 Cess pool 10 Livestock pens 15 Oil well/Gas well 14 How many feet?					
		ING MATERIALS	FROM TO	PLUGGING MA	TERIALS	
	0 3 Top Sei	1.40				
	S SE BENTO	~//E				
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 8-3-10 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 138 This Water Well Record was completed on (mo/day/year) 8-7-10 under the business name of Liters Territory Territory Signature)						
INSTRUCTIONS: Use typewriter or ballpoint 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. Visit us at http://www.kdheks.gov/geo/waterwells.						