WATER WELL PLUGGING RECORD Form WWC-5P KSA 82a-1212 ID NO						
1 LOCATION OF WATER WELL:			Fraction	Section Number	Township Number	Range Number
County: Ellsworth			NW14 SW 14 NE 14	2	14	8 <sub>E</sub> €
Distance and direction from nearest town or city street address of well if located within city?						
N/A						
2 WATER WELL OWNER: Wayne Bohl						
RR #, St. Address, Box #: 1625 Avenue B City, State, ZIP Code : Ellsworth, KS 67439  Board of Agriculture, Division of Water Resources Application Number:						
		ATION WITH	4 DEPTH OF WELL ft.			
AN "X"	IN SECTION N	BOX:	WELL'S STATIC WATER LEVEL 11 ft.			
WELL WAS USED AS:						
NW NE			Domestic 5 Public Water Supply 9 Dewatering			
			2 Irrigation 3 Feedlot			
W E			4 Industrial	8 Air Conditioning		
SW SE SE Was a chemical / bacteriological sample submitted to Department? Yes						
If yes, mo/day/yr sample was submitted						
Water Well Disinfected: YesX No						
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 Sandstone Rock						
Blank casing diameter40 in. Was casing pulled? Yes						
6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other						
Grout Plug Intervals: From						
What is the nearest source of possible contamination:  1 Septic tank 6 Seepage pit 11 Fuel storage 16 Other (specify below)						
<ul><li>1 Septic tank</li><li>2 Sewer lines</li></ul>			<ul><li>6 Seepage pit</li><li>7 Pit privy</li></ul>	<ul><li>11 Fuel storage</li><li>12 Fertilizer storage</li></ul>	***************************************	
3 Watertight sewer lines 4 Lateral lines			<ul><li>8 Sewage lagoon</li><li>9 Feedyard</li></ul>	13 Insecticide storage Abandoned water w		
5 Cess pool 10 Livestock pens 15 Oil well/Gas well						
Direction from well?Nor.th						
FROM TO PL		UGGING MATERIALS				
21	4.5	Chlorinat	ed Sand			
4.5	4	Bentonite				
4	2	Fill Sand				
2 0 Topsoil						
	0	1005011				
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. This Water Well Record was completed on (mo/day/year)722-2005 under the business name of Ellsworth County. NPS Coordinator						
by (sig	nature)	Bu	id brazes	January Mr.J.	uuu.i.iia.uu!	
INSTRUCTI	ONS: Use ty	pewriter or ball	point pen. Please press firr	mly and print clearly. Pleas	se fill in blanks, underline	e 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.						
O, O.O. 120	, .opona,	aneae econe no	07. 1010p/10110. 700/200 00	LL. Cond one to Water W	on Owner and rotain one	ioi your rooordo.