	WATER WELL PLUGGING RECO	RD Form WWC-5P KSA	82a-1212 ID NO. ——	
1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: LVON	SW4 NW4 4	36	15	11
Distance and direction from nearest town or city street address of well if located within city?				
2 WATER WELL OWNER: Bryce DAVIDSON  RR #, St. Address, Box #: 2871 Rd P City, State, ZIP Code: ADMIRE, KS 6683 Opplication Number:				
3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4 DEPTH OF WELL WELL'S STATIC WATER	29 112		
N W N E	WELL WAS USED AS:  1 Domestic 2 Irrigation 3 Feedlot 4 Industrial	5 Public Water Suppl 6 Oil Field Water Sup 7 Domestic (Lawn & 8 Air Conditioning	oply 10 Monito Garden) 11 Injectio 12 Other	ring Well on Well
S W S E	If yes, mo/day/yr sampl	ological sample submitted e was submitted		No
TYPE OF BLANK CASING USED:  1 Steel 3 RMP (SR) 5 Wrought 7 Fiberglass Other (Specify below) R C Casing diameter in the Casing below in the Casing below and surface in the Casing below in				
GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other				
What is the nearest source of poss  1 Septic tank 2 Sewer lines 3 Watertight sewer lines 4 Lateral lines 5 Cess Pool  Direction from well?	ble contamination:  6 Seepage pit 7 Pit privy 8 Sewage lagoon 9 Feedyard 10 Livestock pens How many	11 Fuel storage 12 Fertilizer storage 13 Insecticide stora 14 Abandoned wate 15 Oil well/Gas well	ge r well	ecify below)
	GGING MATERIALS			
191/2 5 Sub			RECEI	VED
5 41/2 Ben 41/2 0 To	50 i / OCT 1 9 2004		2004	
			BUREAU OF	WATER
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No.  This Water Well Record was completed on (mo/day/year) under the business name of by (signature)				
by (signature)		· · · · · · · · · · · · · · · · · · ·	•••••	

INSTRUCTIONS: Use typewriter or ball point pen. <u>Please press firmly</u> and <u>print</u> 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, Topeka, Kansas 66620-0001. Telephone: 785/296-3565. Send one to Water Well Owner and retain one for your records.