			WATER WELL PLUGGING RECO	ORD Form WWC-5P KSA	A 82a-1212 ID NO		
1 LO	CATION OF	WATER WELL:	. Fraction	Section Number	Township Number	Range Numb	
County:	RUSSE	Ш	SW45W45E4	29	155	12 W	
Distance	and direction	on from nearest town or	or city street address of well if lo				
Appr	OX. 1231	14 mi. E. of	Milherger, Ks. or	n Michaelis Rd.			
2 WAT	TER WELL OV	WNER: NCRA	J				
RR #, City, S	, Sl. Address, Stale, ZIP Co	Box #: 1391 IRON	30N, KS. 67460	Application Number:	Division of Water Resources	i	
1 1	RK WELL'S L	LOCATION WITH TION BOX:	4 DEPTH OF WELL	Σ΄ tt			
	N IN SECTI		WELL'S STATIC WATER	LEVEL NA ft.			
			WELL WAS USED AS:				
	- N W	NE	1 Domestic	5 Public Water Supply	,		
			2 Irrigation 3 Feedlot	6 Oll Field Water Sup 7 Domestic (Lawn & 0	ply 10 Monitorin	ng Well	
w	+ +	E	4 Industrial	8 Air Conditioning		· Weli	
	-s w	SE	Was a chemical / bacterio	ological sample submitted	to Department?Yes		
	If yes, mo/day/yr sample was submitted						
	s	X	Water Well Disinfected: Ye	es No			
5 TYPE	E OF BLANK	CASING USED:					
1 Ste		RMP (SR) 5 Wro			nelow)		
2 PV	VC 4 A	ABS 6 Asb	pestos-Cement 8 Concrete	e Tile	•••••		
Blank Casin	casing diam	meterin.	Was casing pulled?	Yes No	If yes, how much	15'	
	JT PLUG MA		at cement 2 Cement grout		er		
1	t Plug Interv		ft. to				
		rest source of possible		1 (01)		10	
1 S	Septic tank	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	6 Seepage pit	11 Fuel storage			
	Sewer lines Watertight se	ewer lines	7 Pit privy 8 Sewage lagoon	12 Fertilizer storage 13 Insecticide storage	- UNKNOW	<i>N</i>	
4 La	ateral lines		9 Feedyard	14 Abandoned water w			
	Cess Pool		10 Livestock pens	15 Oil well/Gas well			
Direc	tion from w	veli?	How many fe	eet?			
FROM	то	PLUGG	GING MATERIALS				
0	10	BENTONITE	8"				
Ю	15	BENTONITE					
				-1 MW4			
				WHELING			
CONTE	- CTODIC	TE TANDOWNED!	TionTioNie This w		to de distanta por cons	lated	
on (mo/	/day/year)	6/23/03	S CERTIFICATION: This w	and this record is true to the	he best of my knowledge a	and belief. Kansas	
Water W	Vell Contracto	or's License No 🔾	32.7 siness name ofGECCORA	This Wate	er Well Record was complete	ed on (mo/day/year)	
			iness name or	Management of the second			

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.