5967	WATER WELL PLUGGING RECORI	O Form WWC-5P KSA	82a-1212 ID	NOI	Layne Western
I LOCATION OF WATER WELL:	Fraction	Section Number	Township I	Number	Range Number
County: Russell	SW 1/4 SE 1/4 NE 1/4	2	T 15	SR	14 E W
	town or city street address of well if loca	ited within city?			
Approximately 7 1/2 miles so	outh and 3/4 mile east of Russell				
	lic Wholesale Water Supply District # 1 Pine Street	±15			
RR#, St. Address, Box # P.O	. Box 220	Board of Agriculture,	Division of Water	Resources	
 	s, KS 67601	Application Number:			3.4.v/M/1
MARK WELL'S LOCATION WIT AN "X" IN SECTION BOX:	H 4 DEPTH OF WELL	35.13 ft			
N	WELL'S STATIC WATER L	EVEL 13.66 ft.			
	WELL WAS USED AS:				
NW	1 Domestic	5 Public Water Supply		9 Dewatering	9
	2 Irrigation	6 Oil Field Water Supply	′	10 Monitoring	g Well
w x	3 Feedlot	7 Domestic (Lawn & Ga	rden)	11 Injection V	Vell
	4 Industrial	8 Air Conditioning		12 Other	Observation Well
S W S E _	Was a chemical / bacteriol	ogical sample submitted	to Departmen	t?Yes	No 🗸
	If yes, mo/day/yr sample	was submitted			X
S	Water Well Disinfected: Ye				
5 TYPE OF BLANK CASING USE		7 Fibersless	0. Otho	r (Cnacify bal	low)
	P (SR) 5 Wrought	7 Fiberglass	9 Oule	r (Specify bel	ow)
2 PVC 4 ABS		8 Concrete Tile	/		Cut off
	8 in. Was casing pulled? below land surface 36	Yes No s	Y If ye	s, now mucr	1 Cut oii
	1 Neat Cement 2 Cement grou	t 3 Rentonite	4 Other	Rentonite	Holeplug
	Fromft. toft.,				
What is the nearest source of					
1 Septic tank	·	- uel storage	16	Other (spec	ify below)
2 Sewer lines	7 Pit privy 12	Fertilizer storage			
3 Watertight sewer lines	8 Sewage lagoon 13	Insecticide storage	None	known	
4 Lateral lines	9 Feedyard 14	Abandoned water well			
5 Cess Pool	· · · · · · · · · · · · · · · · · · ·	Dil well/Gas well			
Direction from well?	How many fe	et?			
FROM TO	PLUGGING MATERIALS				
35.13 0 Bento	nite Holeplug				
		7			
		_			
		_			
7		<u> </u>			
CONTRACTOR'S OR LAN on (mo/day/year)	NDOWNER'S CERTIFICATION: This 5-13-02 and	s water well was plugged this record is true to the			
Water Well Contractor's Li			•		n (mo/day/year)
)	<i>y</i>	Vell & Equipment, Inc.		- 	
by (signature)	1 W April				
INSTRUCTIONS: Use typewrite	er or ball point pen. Please press firm	nly and <u>print</u> clearly. Ple	ase fill in blank	s, underline	or circle the correct
answers. Send top three copies	s to Kansas Department of Health & End one to Water Well Owner and reta	Environment, Bureau of	Water, Topeka,	, Kansas 66	3620-0001.