We/1 #12			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: ELLIS			SE 14 NE 14 SE 14	28	T155	18 E
Distance and	direction from	nearest town or	city street address of well if loc	ated within city?	380	42 56,22 N (A)
.4 miles	North of	Schomolen	Rd + 1/6 mile We	est of 250+5	9901	191 15.69" W (App.
2 WATE	R WELL OWN	IER: City of	of Hay,			
RR #, S	t. Address, Bo ite, ZIP Code	ox#: Haus .	KS 6760/	Application Number	re, Division of Water Resou er:	rces
		ATION WITH		54 ft.		
AN "X"	IN SECTION	BOX:	WELL'S STATIC WATE	R LEVEL		
	Ï		WELL WAS USED AS:			
NV	<i>y</i> — —	NE	1 Domestic	Public Water Supply		
		2 Irrigation 6 Oil Field Water Supply 10 Monitoring Well 3 Feedlot 7 Domestic (Lawn & Garden) 11 Injection Well				
W		E	4 Industrial	8 Air Conditioning	12 Other	
sv	v ————	_ SE		gical sample submitted to D		(No)
If yes, mo/day/yr sample was submitted						
<u> </u>	S		Water Well Disinfected:	No		
5 TYPE	OF BLANK C	ASING USED:				
D Stee	el 3RM	MP(SR) 5 W	rought 7 Fibergl	ass 9 Other (Specify I	below)	
2 PVC	2 4 AB	S 6 As	sbestos-Cement 8 Concre	te Tile		
Blank Casing	casing diame g height above	terb in. e or below land s	Was casing pulled?	in.	If yes, how m	nuch
Grout F What is			_	, Fromft.		to ft
1 Septic tank 2 Sewer lines			6 Seepage pit 7 Pit privy	11 Fuel storage12 Fertilizer storage		
3 Watertight sewer lines 4 Lateral lines			8 Sewage lagoon9 Feedyard	13 Insecticide storage14 Abandoned water	•	100~1
5 Cess pool			10 Livestock pens	15 Oil well/Gas well		
Directi	on from well?		How many	feet?		
FROM	то	PI	LUGGING MATERIALS	* Pedest	Removed	
541	25'	Chlor	inated Sand	164()/4/	74110060	
25	31		Grout			
3'	0'	Native				
7 CONT	DACTOR'S		EP'S CERTIFICATION: This		d under my juriediation	and was completed on
(mo/da	ıy/year)	4/12/	10	and this record is tru	ue to the best of my know	ledge and belief. Kansas
Water V	Vell Contracto	r's License No under #	ie bysiness name of	yne Chastense	ater Well Record was con	npleted on (mo/day/year)
			I point pen. <u>Please press fir</u>			
			sas Department of Health a 367. Telephone: 785/296-55			