		WATER WELL PLUGGING RECC	ORD FORM WWG-5P KSA	(82a-1212 ID NO	
			<u></u>	Market	
	TION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: 2	Barton	SE 1/4 SE 1/4 SE 1/4	36	16	12 a
		or city street address of well if lo	•		
Beu	ver 4mi Easi	+ 2 mi South	West into		
2 WATER	RWELLOWNER: Rober	+ Bonome			
RR #, St City, Sta	t. Address, Box #: 1725 ate, ZIP Code : #01514	stor KS 67544	Board of Agriculture, Application Number:	, Division of Water Resourc	es
	(WELL'S LOCATION WITH " IN SECTION BOX:	4 DEPTH OF WELL			
	N	WELL'S STATIC WATER	R LEVEL ft.		
		WELL WAS USED AS:			
	N W N E	1 Domestic	5 Public Water Supp		•
		2 Irrigation 3 Feedlot	6 Oil Field Water Su Domestic (Lawn &		oring Well ion Well
w		4 Industrial	8 Air Conditioning		
s	SWSE	Was a chemical / bacter	iological sample submitte	d to Department?Yes	No
		If yes, mo/day/yr samp	le was submitted	••••••	
	X S	Water Well Disinfected:	Yes No		
5 7/05					
	OF BLANK CASING USED:				
¥ Ste 2 PV		Wrought 7 Fibergl Asbestos-Cement 8 Concre	, , ,	/ below)	
	casing diameter	. Was casing pulled?	Yes No	If yes, how n	
6 GROU	IT PLUG MATERIAL: 1 I	Neat cement 2 Cement grou	ut & Bentonite 4 C	Other	
		169 ft. to	-		
	is the nearest source of pos	•		,	
1 Septic tank 6 Seepage pit 11 Fuel storage 16 Other (specify below)					
2 Sewer lines 7 Pit privy 12 Fertilizer storage					
4 L	ateral lines	9 Feedyard	14 Abandoned water	er well	
5 C	Cess Pool	10 Livestock pens	15 Oil well/Gas wel	ll .	
Direc	ction from well?	How many	/ feet?		
FROM	TO PL	UGGING MATERIALS			
172	169 1/1sindent	2 Sand 1,4080	L		
169	O Bentonit	- Hoteshy. 37.78	r 14		
101	000	- 11st frage 20.10			
***			- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1		
7 CONT	'RACTOR'S OR LANDOW! o/dav/vear)スーノの	NER'S CERTIFICATION: Thi	is water well was plugge	ed under my jurisdiction	n and was completed
Water	Well Contractor's License No.	ne business name of	This	Water Well Record was co	mpleted on (mo/day/year)
by (sig	nature)	ne business name of	aman water we	~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~	••••••
		oall point pen. <u>Please press fi</u>			
answers.	Send top three copies to	Kansas Department of Heal	th and Environment, Bui	reau of Water, Topeka,	Kansas 66620-0001.
reiepnone	: / 85/296-3565. Send one to	Water Well Owner and retain or	ne tor your records.		