WATER V	VELL PLU	GGING RECORD	Form W	WC-5P	KSA 8	32a-1212	ID NO.		
	TION OF V	WATER WELL:	Fraction SE ¼				Township Number 17S	Range Number 17W	
Distance and direction from nearest town or city street address of well if located within city?									
101 N. Main, Bison, KS									
2 WATER WELL OWNER: Mid-State Coop Global Positioning System (decimal degrees, min. of 4 digits) Latitude: NA									
RR#, St. Address, Box #: 101 N. Main					Longitude: NA				
City, State, ZIP Code: Bison, KS					Elevation: NA Datum: NA Data Collection Method: NA				
2 P4 D7/	WET I IC	LOCATON	4 DEPTH OF WELL 53.53 ft. MW4						
1		LOCATON SECTION	WELL'S STATIC WATER LEVEL NA ft.						
BOX:									
	٨	I	WELL	D AS:					
1 Domestic 5 Public Water Supply 9 Dewatering								nσ	
	NW-	⊢ NE ─	2 Irrigation 6 Oil Field Water Supply (10) Monitoring						
W	v 	E E	3 Feedlot 7 Domestic (Lawn & Garden) 11 Injection Well						
	-sw-	- SE -	4 Industrial 8 Air Conditioning 12 Other						
		<u></u> x]	Was a	Was a chemical/bacteriological sample submitted to Department? YesNo _X					
5 TYPE OF BLANK CASING USED:									
1 Steel 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (specify below)									
2PVC 4 ABS 6 Asbestos-Cement 8 Concrete Tile									
Blank casing diameter 2 in. Was casing pulled? Yes x No If yes, how much 2' Casing height above or below land surface NA in.									
6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other Gravel: 0-0.3'; Soil: 0.3-3'									
Grout Plug Intervals: From 3 ft. to 53.53 ft., From ft. to ft., From ft. to ft.									
What is the nearest source of possible contamination:									
1 Septic tank 6 Seepage pit 11 Fuel storage 16 Other (specify below)									
2 Sewer	2 Sewer lines 7 Pit privy 12 Fertilizer storage								
3 Watertight sewer lines 8 Sewage lagoon 13 Insecticide storage 4 Lateral lines 9 Feedyard 14 Abandoned water well Direction from well?									
4 Lateral lines 9 Feedyard 14 Abandoned water well Direction from well? 5 Cess pool 10 Livestock pens 15 Oil well/Gas well How many feet?									
FROM	OM TO PLUGGING MATERIALS FR				FROM	OM TO PLUGGING MATERIALS			
0	0.3	Gra	vel						
0.3	3	So							
3	53.53	Bente	onite i						

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was									
completed on (mo/day/year) 7/27-28/15 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 757 This Water Well Record was completed on (mo/day/year) 8/3/15 under the									
Well Contractor's License No. 757 This Water Well Record was completed on (modal year) 8/3/15 under the business name of Larsen and Associates, Inc. by (signature)									
							nieg Kaneae Davertr	ment of Health and	
Environme	INSTRUCTIONS: Please fill in blanks or circle the correct answers. Send top three conies to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Ste. 420, Topeka Kansas 66612-1367. Telephone: 785/296-5522. Send one to Water Well Owner and retain one for your records. Visit us at http://www.kdheks.gov/waterwell.								
/83/290-3322. Send one to water well Owner and retain one for your records. Visit us at this www.kdneks.gov/waterwell.									