	WATER WELL PLUGGING R	ECORD Form WWC-5P	KSA 82a-1212 ID N	0	
1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number	
County: Rush	SW14 SW 14 NW14	34	17	18 EW	
Distance and direction from nearest town or city street address of well if located within city?					
W well, E trench, Schaffer Oil, LaCrosse					
2 WATER WELL OWNER: SCHAFFER OIL COMPANY					
RR #, St. Address, Box #: 1022 Main Street Board of Agriculture, Division of Water Resources City, State, ZIP Code : LaCrosse, KS 67548 Application Number:					
3 MARK WELL'S LOCATION WITH 4 DEPTH OF WELL 20 ft.					
AN "X" IN SECTION BOX: WELL'S STATIC WATER LEVEL12 ft.					
	WELL WAS USED AS:	E. Duklin Water Ourok	O. Davistari		
NW NE	1 Domestic 2 Irrigation	5 Public Water Supply6 Oil Field Water Supply		ng Well	
w X	3 Feedlot 4 Industrial	7 Domestic (Lawn & Ga 8 Air Conditioning	arden) 11 Injection	Well sparge	
We also will discontinue to the state of the					
SW SE	SW SE SE Was a chemical / bacteriological sample submitted to Department? Yes				
	Water Well Disinfected: Yes No				
S					
5 TYPE OF BLANK CASING USED:					
1 Steel 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (Specify below) ● PVC 4 ABS 6 Asbestos-Cement 8 Concrete Tile					
Blank casing diameter2 in. Was casing pulled? Yes					
Casing height above or below land surface					
GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout ● Bentonite 4 Other					
What is the nearest source of possible contamination:					
1 Septic tank 6 Seepage pit 11 Fuel storage 16 Other (specify below)				cify below)	
2 Sewer lines 3 Watertight sewer lines	7 Pit privy 8 Sewage lagoon	12 Fertilizer storage 13 Insecticide storage	***************************************		
4 Lateral lines	9 Feedyard	14 Abandoned water w 15 Oil well/Gas well	ell		
Direction from well? How many feet?					
FROM TO PL	UGGING MATERIALS				
0 3 Bentonite (8")		AS3			
3 20 Bentonite (2")					
		KDHE #U6 083	10617		
7 CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on					
(mo/day/year)					
Water Well Contractor's License No					
by (signature)					
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, 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.