				WATER WELL PLUGGING R	ECORD Form WWC-5	P KSA 82a-1212 ID	NO
1	LOCAT	ON OF WAT	ER WELL:	Fraction	Section Number	Township Number	Range Number
County: Marion				SW ^{1/4} NW ^{1/4} NW ^{1/4}	15	17	2 E/ X
Distance and direction from nearest town or city street address of well if located within city?							
3 miles North & 2 miles West of Tampa, KS							
2	WATER	WELL OWN	Ron Ji	rak aming's Inc.			
	BB # St	Address, Bo	442 ~	2nd St.	Board of Agricultu	re, Division of Water Resou	irces
				n, KS 66861 Application Number: N/A			
MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX: 4 DEPTH OF WELL200, 200, 200, 200 WELL'S STATIC WATER LEVEL38							
[N		WELL WAS USED AS: 1 Domestic 5 Public Water Supply 9 Dewatering			
	NW NE		_ NE				
			i l	2 Irrigation 6 Oil Field Water Supply 10 Monitoring Well			ring Well
w		E		3 Feedlot 7 Domestic (Lawn & Garden) 11 Injection Well 4 Industrial 8 Air Conditioning 12XOther Ge0ThermalWe]			
					v		
			— SE ———	Was a chemical / bacteriological sample submitted to Department? Yes			
				Water Well Disinfected: Yes NoX			
S							
TYPE OF BLANK CASING USED:							
1 Steel 3 RMP (SR) 5 Wrought 7 Fiberglass Mother (Specify below) 2 PVC 4 ABS 6 Asbestos-Cement 8 Concrete Tile Polyethylene							
Blank casing diameter3/4 in. Was casing pulled? Yes							
GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3XBentonite 4 Other							
Grout Plug Intervals: From 5 ft. to200 ft., From ft. to200 ft., From ft.							
What is the nearest source of possible contamination: 5 200 5 200							
1 Septic tank				6 Seepage pit	11 Fuel storage		pecify below)
	2 Sewer lines			7 Pit privy 8 Sewage lagoon	12 Fertilizer storage13 Insecticide stora		
	3 Watertight sewer lines 東 Lateral lines			9 Feedyard	14 Abandoned water		
5 Cess pool				10 Livestock pens	15 Oil well/Gas well		
Direction from well?							
FROM TO		Log XX	MANNAMATERIALS				
0		2					
2			Topsoil Shale, g	777			
17		34	Limeston				
34		107	Shale, q				
107		121	Limestone				
121		200	Shale, gray				
7 CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on and this record is true to the best of my knowledge and belief. Kansas							
(mo/day/year)3/13/09							
water well contractor's License No							
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.