	WATER WELL PLUGGING RECO	ORD Form WWC-5P KSA	.82a-1212 ID NO. —.				
1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number			
County: McPherson	NW1/4 NW1/4 NE 1/4	15	17 5	3 W			
Distance and direction from nearest town of			C-2				
WATER WELLOWNER: Marty Johnson RR #, St. Address, Box #: Lindsborg, KS 67456 Board of Agriculture, Division of Water Resources Application Number:							
MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4 DEPTH OF WELL						
N	WELL'S STATIC WATER	RLEVEL 26 ft.					
	WELL WAS USED AS:						
N W	1 Domestic, 2 Irrigation	5 Public Water Supp6 Oil Field Water Su	pply 10 Monit	itering oring Well			
W E	3 Feedlot 4 Industrial	7 Domestic (Lawn & 8 Air Conditioning	,	ion Well			
S W ———————————————————————————————————	Was a chemical / bacter	iological sample submitte	d to Department?Yes	No X			
		le was submitted					
S	Water Well Disinfected:	Yes No					
5 TYPE OF BLANK CASING USED:	TYPE OF BLANK CASING USED:						
	/rought 7 Fiberg		•				
Blank casing diameter							
	eat cement 2 Cement gro		Other				
Grout Plug Intervals: From	3 ft. to 26 ft	., From ft. to	ft., From	to f			
What is the nearest source of pos		44 Eval starses	40. Other (e	manife haland			
1 Septic tank 6 Seepage pit 11 Fuel storage 16 Other (spec 2 Sewer lines 7 Pit privy 12 Fertilizer storage							
3 Watertight sewer lines	8 Sewage lagoon	13 Insecticide store	-				
4 Lateral lines 5 Cess Pool	9 Feedyard10 Livestock pens	14 Abandoned wate 15 Oil well/Gas wel					
Direction from well?	How man	2001					
FROM TO PLU	JGGING MATERIALS						
71 26 Sano			DEOE11 /F	m gray			
11 3 8 1	t ₁		RECEIVE	:U			

FROM	то	PLUGGING MATERIALS		
7/	26	SanQ		
26	3	Bentonite		
3	0	70p Soil		

OCT 2 5 2004

BUREAU OF WATER

7	CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year)
	on (mo/day/year)
	Water Well Contractor's License No
	10-8-07 upper the business name of FFERS at LRE 1941/2
	Water Well Contractor's License No
	-) (-g)

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, Topeka, Kansas 66620-0001. Telephone: 785/296-3565. Send one to Water Well Owner and retain one for your records.