٧	VATER WI	IGGIN	3 REC	ORD		Form	wwc-	5P	KSA 82a-1212	ID No	MW-4	
1 LOCATI	ON OF WA	TER WEL	L: F	ractio	n					Section Number	Township Number	Range Number
County:	Ne	ess		SE	1/4	NW	1 1/4	NE	1/4	31	18	23-West
Distance and direction from nearest town or city street address of well if located within city? 520 S. Pennsylvania, Ness City, Kansas												
2 WATER WELL OWNER: Harold Gable												
RR#, St. A	Address, Bo	ox# 3	01 Sy	camo	re					Boar	d of Agriculture, Divisio	n of Water Resources
City, State	, ZIP Code	: N	less C	ity, k	(ansa	s 675	60			Appl	ication Number:	
3 MARK V	VELL'S LOC ECTION BO	X: X:	ITH AN	4 [EPTH	OF WE	ELL		4	10 ft		
	N	_	١ ،	VELL'S	STATI	C WAT	TER LE	VEL	32.05 ft			
		X				VAS US						
	NW —	NE	1		1	Dome	etic		5 Publ	ic Water Supply	2 Dewater	ina
w	1	Е	1 Domestic 2 Irrigation						ield Water Supply		Monitoring Well	
				Feedl				n and Garden (domes	stic) 11 Injection	Well		
	sw	-			4	Indus	trial		8 Air C	Conditioning	12 Other	
	!	- 3L !									nt? Yes	No X
If yes, mo/day/yr sample was submitted												
S Water Well Disinfected: Yes No.X												
5 TYPE OF BLANK CASING USED: 1 Steel 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (specify below)												
DBVC 4 ADC 6 Ashertes Coment 9 Conserts Tile												
Blank casing diameter 2.375 in. Was casing pulled? Yes No x If yes, how much? N/A												
Casing height above or leave land surface Unknown in. Casing plugged; casing removed to depth of 3' BTOC.												
6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other Soils/Concrete												
Grout Plug Intervals From 40.0 ft. to 3.0 ft. From 3.0 ft. to 1.0 ft. From 1.0 ft. to 0.0 ft.												
Grout Plug Intervals From 40.0 π. to 3.0 π. From 3.0 π. to 1.0 π. From 1.0 π. to 0.0 π. What is the nearest source of possible contamination:												
What is	the nearest	source o	t possib	ole con	tamina	tion:		_				
1 Septic tank				6 Seepage pit				(1	Fuels	storage (former)	16 Other (specify	oelow)
2 Sewer lines				7 Pit privy						zer storage		
3 Watertight sewer lines 4 Lateral lines				8 Sewage lagoon 9 Feedyard						ticide storage doned water well		
	ss Pool				tock pe	ns				ell/ Gas well		
Direction fro	om well?	No	orthwe	est				How	many f	feet? 5	5	
			1							7		
FROM	TO	CODE										
0.0	1.0	1	Concrete									
1.0	3.0	<u> </u>	Soils Bentonite chips									
3.0	40.0		Bento	onite	cnips	S						
		<u> </u>										
7			<u> </u>									
CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed												
on (mo/day/yr) 05/24/97 and this record is true to the best of my knowledge and belief. Kansas												
Water Well Contractor's License No. 692 This Water Well Record was completed on (mo/day/yr) 05/25/07 Junder the business name of Quad State Services, Inc.												
by (signature)												
INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and												
Envir	onment, B	ureau o	f Wate	r, 10(00 S W	/ Jack	son S	St., Ste	. 420,	Topeka, Kansas 6	6620-0001. Telepho	ne: 785-296-3565.
Send	one to Wa	ater We	II Own	er and	l retai	n one	for yo	ur rec	ords.		•	