				WATER WELL PLU	GGING REC	CORD Form WWC-5P	KSA 82a-1212 ID N	10	
1	LOCAT	ION OF WAT	ER WELL:	Fraction		Section Number	Township Number	Range Number	
County: Scott				JW SE 1	NE 14	24	18	31 €₩	
Distance and direction from nearest town or city street address of well if located within city?									
2 WATER WELL OWNER: Cadillac Feeders									
	RR #, St. Address, Box #: City, State, ZIP Code: Scott Crty, Ks 67871  Board of Agriculture, Division of Water Resources Application Number:								
		te, ZIP Code				Application Number	:		
3	MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:			4 DEPTH OF WELL					
	N NE NE NE NE			WELL'S STATIC WATER LEVEL					
W									
									3 Feedlo
							4 madst		
		sw	1	— SE ——	Was a chemical / bacteriological sample submitted to Department? Yes				
				Water Well Disinfected: Yes No					
		S		water well disinfe	Water Well Disinfected: Yes No				
5	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 diameter									
6	GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout Sentonite 4 Other								
Grout Plug Intervals: From									
What is the nearest source of possible contamination: NON &									
	<ul><li>1 Septic tank</li><li>2 Sewer lines</li></ul>			6 Seepage pit 7 Pit privy		<ul><li>11 Fuel storage</li><li>12 Fertilizer storage</li></ul>	16 Other (spe	cify below)	
	<ul><li>3 Watertight sewer lines</li><li>4 Lateral lines</li></ul>			<ul><li>8 Sewage lagoon</li><li>9 Feedyard</li></ul>		13 Insecticide storage 14 Abandoned water well			
	5 Cess pool			10 Livestock pen		15 Oil well/Gas well	ven		
Direction from well?									
FROM TO PLUGGING MATERIALS									
			7/						
-	60	119	74 yas 1	Ulished Sond + entonite + Clay	gravel				
	20	60	1/2 ya. D	entonite + Clay	Mixed				
	3	20	, .	te chips					
	0	3	top 501	/					
						_			
_									
CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was complete								nd was completed on	
(mo/day/year)									
	by (sig	nature)	Leter S	te business name of	T.(16	West West 4	TUMP JAC		
IN	STRUCTION	ONS: Use to	pewriter or bal	l point pen. Please	press firmly	and print clearly. Pleas	se fill in blanks, underlin	e or circle the correct	
	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.