			WATER WELL PLUGGING F	RECORD Form WWC-5P	KSA 82a-1212 ID	NO. 0047888	
1 LC	CATION OF	WATER WELL:	Fraction	Section Number	Township Number	Range Number	
County;	Scott	NW 1/4	SW 14 NW 14 SW 14	19	18	32i	
Distance (and direction f Main, Scott Cli	rom nearest town or	city street address of well if loo	ated within city?		L. E	
	TER WELL O		4.				
	f, St. Address	**************************************					
City,	State, ZIP Co	OUX IF:	ly, KS 67871	Board of Agriculture. Application Number	, Division of Water Resou	rces	
3 MA	RK WELL'S L	OCATION WITH	4 DEPTH OF WELL1	49.59 ft.			
791	N IN OCCUP	ON BOX:	WELL'S STATIC WATE	R LEVEL 135.18 ft.			
			WELL WAS USED AS:				
-	ww	NE	1 Domestic	5 Public Water Supply	9 Dewater	risi ne	
			2 Irrigation 3 Feedlot	6 Oll Field Water Supply	y ✓ Monitori	ng Well MW-2	
W			4 Industrial	7 Domestic (Lawn & Ga 8 Air Conditioning		Well	
<u> </u>	3W	SE	Was a chemical / bacteriolog	ical sample submitted to re-			
	,,,		If yes, mo/day/yr sample was	submitted	vartment/ yes	NOX	
L	<u> </u>		Water Well Disinfected: Yes	No/			
Trvn							
		CASING USED:				**************************************	
1 St 2 P\		IMP (SR) 5 Wroi BS 6 Ash	ught 7 Fiberglas estos-Cement 8 Concrete		ow)		
genoused		eter4'' in.	_Was casing pulled?				
Casi	ng height abo	ve or <mark>below</mark> land surf	ace36in	YesV No	If yes, how muc	ch3'	
. 3	UT PLUG MA		at cement 2 Cement grout	Bentonite 4 Oth)er:		
	Plug Interval			Fromft. to	ft., From	······································	
i .		source of possible of					
Septic tank Sewer lines Watertight sewer lines I steral lines			6 Seepage pit 11 Fuel storage 16 Other 7 Pit privy 12 Fertilizer storage		16 Other (spec	the state of the s	
		8 Sewage lagoon	12 Fertilizer storage 13 Insecticide storage				
4 Lateral lines 5 Cess pool		9 Feedyard 10 Livestock pens	14 Abandoned water wet 15 Oil well/Gas well	I			
Direct	tion from well	?·		et?			
·····	·	***************************************	**************************************		*****		
		GING MATERIALS	· · · · · · · · · · · · · · · · · · ·				
0	0.5	cement					
0.5	3	native soil					
3	149.6	hentonite grout		******			
							
dirim dinaking padada	**************************************						

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CONTI	RACTOR'S (OF LANDOWNER'S	S CERTIFICATION: This wa	iter well was plugged und	der my jurisdiction and	was completed on	
Water W	fell Contractor	's Linguisa No. 7	16	m and this tecold is tide for	the pest of my knowledg	le and belief. Kansas	
a/.4.(/. bv (sia:	is	under the b	usiness name of MILCO E	nykonmental Services, Inc.	well necord was comple	ted on (mo/day/year)	
And Milani				*************************************	***************	************	
simuutik swers, Sei	JNS: Use ty nd top three	pewriter or ball poi	nt pen. <u>Please press firmly</u>	and <u>print</u> clearly. Please fi	ll in blanks, underline c	or circle the correct	
			Department of Health and E Telephone: 785/296-5522.				
***********				The second of the second section of the second seco	carries and totall 009 (a your records.	