AS-4

WATER WELL PLUGGING RECORD

Form WWC-5P

KSA 82a-1212

ID NO.00295624

1 LOCA	ATION OF WA	TER WELL:	Fraction	Section Number	Township Number	Range Number
County: \	/ichit		CERCE RNE RSE	19	18	35 6
County: Wickita SE'4SE 4NE 4SE 18 18 30 EW Distance and direction from nearest town or city street address of well if located within city?						
179 N. 120th Rd Marienthal, KS 67863						
2 WATER WELLOWNER. Scott Cooperative Association						
RR #, St. Address, Box #: P.O. Box 340 City, State, ZIP Code: Scott City, KS 67871 Board of Agriculture, Division of Water Resources Application Number:						
3 MARK WELL'S LOCATION WITH 4 DEPTH OF WELL 14. 7. ft.						
1 1 10/401	" IN SECTION	N BOX:				
			WELL WAS USED AS:			
WN	W	NE — E	1 Domestic 2 Irrigation 3 Feedlot 4 Industrial	5 Public Water Supply6 Oil Field Water Supply7 Domestic (Lawn & C8 Air Conditioning	ply 10 Monitori Garden) 11 Injection 12 Other	ing Well
SE X Was a chemical / bacteriological sample submitted to Department? Yes						
Water Well Disinfected: Yes NoX						
5 TYPE OF BLANK CASING USED:						
1 Steel 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (Specify below) (2 PVC) 4 ABS 6 Asbestos-Cement 8 Concrete Tile						
Blank casing diameter						
6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other						
Grout Plug Intervals: From 142 ft. to 3 ft., From ft. to ft., From ft., From ft., From ft., From ft.						
What is the nearest source of possible contamination:						
				11) Fuel storage 12 Fertilizer storage	16 Other (spe	ecify below)
3 Watertight sewer lines			8 Sewage lagoon	13 Insecticide storage)	
4 Lateral lines 5 Cess pool			9 Feedyard 10 Livestock pens	14 Abandoned water 15 Oil well/Gas well	Well	
Direct	ion from well?	SW	How many	feet?		
FROM TO PLUGGING MATERIALS						
142'	3'	Bentonit	e chips			
3'	ى ك'	Native				ĺ
		7001100	Marchia			
					•	
CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. This Water Well Record was completed on (mo/day/year) and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. This Water Well Record was completed on (mo/day/year) by (signature) See Peage						
	0					
INSTRUCTIONS: Use typewriter or ball point pen. Please press firmly and print 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						