	WATER WELL PLUGGING R	ECORD Form WWC-5P	KSA 82a-1212 ID N	NO
1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: Republic	SW14 14 14	2	1	5 EW
Distance and direction from nearest town or	1			
2 WATER WELL OWNER: Phyl	Ilis Habert SE Republic			
	ina, KS 6740	Board of Agriculture, Application Number:	Division of Water Resour	ces
	4 DEPTH OF WELL	F.A.		•
MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:	WELL'S STATIC WATE	-		
N .		n Level II.		
	WELL WAS USED AS:			
NW NE	Domestic 2 Irrigation	5 Public Water Supply6 Oil Field Water Supply	9 Dewater y 10 Monitorii	
WE	3 Feedlot 4 Industrial	7 Domestic (Lawn & Ga 8 Air Conditioning	arden) 11 Injection	
		_		. /
SW SE	Was a chemical / bacteriological lf yes, mo/day/yr sample wa	gical sample submitted to Deposited to Deposited	partment? Yes	No!
×	Water Well Disinfected: Ye	s No N/A		
S		· · · · · · · · · · · · · · · · · · ·		
5 TYPE OF BLANK CASING USED:				
	ought 7 Fibergla bestos-Cement 8 Concret		elow)	
Blank casing diameter5 in.	Was casing pulled?		If yes, how mu	uch3.
Casing height above or below land su			if yes, now mu	
	eat cement 2 Cement grou		ther	
	\$3 . ft. to 4.3 ft.,	From5ft. to		to ft.
What is the nearest source of possible		44 Evalutaria	40. 011 (
1 Septic tank2 Sewer lines	6 Seepage pit7 Pit privy	11 Fuel storage12 Fertilizer storage	16 Other (spe	
3 Watertight sewer lines 4 Lateral lines	8 Sewage lagoon 9 Feedyard	13 Insecticide storage14 Abandoned water w	ell	
5 Cess pool	10 Livestock pens	15 Oil well/Gas well		
Direction from well? Surrounding How many feet?				
FROM TO PL	UGGING MATERIALS			
0 3 Tons	1:0	-		
3 4 804	7-			
11 5	nite			
T J Jane	- ' - '-			
	ionite			
6 50 San				
CONTRACTOR'S OF LANDOWNE (mo/day/year)	ER'S CERTIFICATION: This	water well was plugged water well was plugged water water was and this record is true	under my jurisdiction a to the best of my knowle	and was completed on edge and belief. Kansas
Water Well Contractor's License No.		Thic Wat	or Wall Booard was come	ploted on (mo/day/year)
by (signature)	Carlos Halle Of			
INSTRUCTIONS: Use typewriter or ball	point pen. Please press firr	nly and print clearly. Pleas	e fill in blanks, underlin	e or circle the correct
answers. Send top three copies to Kans	sas Department of Health ar	nd Environment, Bureau of	f Water, Geology Section	on, 1000 SW Jackson