				١	WATER WELL PLUGGING R	ECORD	Form WWC-5P	KSA 82a-1212	ID NO		
1 LOCATION OF WATER WELL: County: Pawn+{ Distance and direction from nearest town or				or cit	Fraction SW SW SE 14 14 14 The street address of well if local		8	Township Nur	mber Range	Number 9 E/W	
Dis	ance and		Ticarcot town	JI ()	y street address of well if look	atou within	only .				
2	RR #, S	R WELL OWN t. Address, Bo te, ZIP Code	IER: Rong DX #: RR# : N	i kl † 1 !eKe	Pfenninger Box53 Sma, Ks 67559		pard of Agriculture	e, Division of Water F r:	Resources		
3	MARK	WELL'S LOC	ATION WITH		4 DEPTH OF WELL						
H	AN "X" IN SECTION BOX:			ŀ	WELL'S STATIC WATER LEVEL						
w		N -NW NE		E	WELL WAS USED AS: 1 Domestic 5 Public Water Supply 9 Dewatering 2 Irrigation 6 Oil Field Water Supply 10 Monitoring 3 Feedlot 7 Domestic (Lawn & Garden) 11 Injection W 4 Industrial 8 Air Conditioning 12 Other A.S. Was a chemical / bacteriological sample submitted to Department? Yes						
	SW SE				If yes, mo/day/yr sample was submitted						
	X				Water Well Disinfected: Yes .X No						
	S										
5	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 in. Was casing pulled? Yes No If yes, how much In. Casing height above or below land surface in.											
6	GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other										
Grout Plug Intervals: From											
What is the nearest source of possible contamination:									(if bl)		
1 Septic tank 2 Sewer lines				6 Seepage pit 7 Pit privy	12 F	1 Fuel storage 16 Other (specify below) 2 Fertilizer storage					
	3 Watertight sewer lines 4 Lateral lines				8 Sewage lagoon9 Feedyard		13 Insecticide storage 14 Abandoned water well				
	5 C	ess pool	. 1		10 Livestock pens	15 C	il well/Gas well				
	Direct	on from well?	North		How many	feet?3	0				
-	FROM	то		PLU	GGING MATERIALS						
2	<u>)</u> -	5	5017 5								
	5	3	Bentor	1,7	4						
	3	0	501								
7	(mo/da	w/warl	6-9-1	26	business name of O.W.1.	and	this record is tru	e to the best of my l	knowledge and be	elief Kansas	
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.