| | | | WATER WELL PLUGGING R | ECORD Form WWC-5P | KSA 82a-1212 ID | NO | |
|--|--|---------------------------------|---|--|-----------------------------|--------------------------|--|
| 1 LOC | ATION OF WATER WELL | : | Fraction | Section Number | Township Number | Range Number | |
| County: | Pawnee | | NE14 SE14 SE14 | 32 | 21 | 16 EA | |
| | d direction from nearest to d, Larned | own or c | ity street address of well if loca | ated within city? | | | |
| 2 WAT | ER WELL OWNER: Paw | nee Co | unty Coop | | | | |
| RR #, City, S | St. Address, Box #: 103 State, ZIP Code : Larr | | | Board of Agriculture Application Number | e, Division of Water Resour | rces | |
| | K WELL'S LOCATION W | ITH | 4 DEPTH OF WELL 17 ft. | | | | |
| AN -/ | X" IN SECTION BOX: | | WELL'S STATIC WATE | R LEVELn/a ft. | | | |
| | | | WELL WAS USED AS: | | | | |
| | IW NE | | 1 Domestic 2 Irrigation | 5 Public Water Supply6 Oil Field Water Supply | | | |
| w | | E | 3 Feedlot 4 Industrial | 7 Domestic (Lawn & G 8 Air Conditioning | arden) 11 Injection | | |
| § | SW SE X Was a chemical / bacteriological sample submitted to Department? Yes | | | | | | |
| | Water Well Disinfected: Yes No | | | | | | |
| 5 TYPE | OF BLANK CASING US | ED: | | | | | |
| 1 St | eel 3 RMP (SR) | 5 Wro | ought 7 Fibergla | ss 9 Other (Specify be | elow) | | |
| ● P\ | _ | | estos-Cement 8 Concret | | | | |
| | k casing diameter2 ng height above or below | | Was casing pulled? facei | | If yes, how mo | uch3' | |
| 6 GRO | UT PLUG MATERIAL: | | at cement 2 Cement grou | | OtherNative.soil | | |
| | t Plug Intervals: F is the nearest source of p | | .0 ft. to3 ft., | Fromft. to | 17 ft., From | to f | |
| | Septic tank | possible | 6 Seepage pit | 11 Fuel storage | 16 Other (spe | ecify below) | |
| 2 Sewer lines 3 Watertight sewer lines | | | 7 Pit privy 8 Sewage lagoon | 12 Fertilizer storage13 Insecticide storage | | | |
| 4 Lateral lines 5 Cess pool | | 9 Feedyard 10 Livestock pens | 14 Abandoned water v 15 Oil well/Gas well | | | | |
| | ction from well? | | • | feet? | | | |
| | | | | | | | |
| FROM | | | JGGING MATERIALS | | | | |
| 0 | | | | SVE9 | | | |
| 3 | 17 Bentonit | te (2") | | GeoCore #127 | 8 | | |
| | | | | KDHE #U1 07: | 3 00061 | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| /mo/d | au/vear) | | R'S CERTIFICATION: This 2/1/2007 | and this record is true | to the best of my knowle | adne and helief Kansas | |
| Water | Well Contractor's License | No | | This Wat | ter Well Record was com | pleted on (mo/day/year) | |
| by (si | gnature) | Le me | ousiness name of .O. G. D. D. D. C. | | | | |
| NSTRUCT | IONS: Use typewriter | or ball p | point pen. <u>Please press firm</u> as Department of Health an | nly and print clearly. Pleas | se fill in blanks, underlir | ne or circle the correct | |

St., Ste. 420, Topeka, Kansas 66612-1367. Telephone: 785/296-5522. Send one to Water Well Owner and retain one for your records.