		WATER WELL PLUGGING R	ECORD Form WWC-5P	KSA 82a-1212 ID N	O. No Tag
1 LO	CATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County:	Pawnee	NE14 SE14 SE14	32	. 21	16 € ∕W
	and direction from nearest town or	city street address of well if loc	ated within city?		
103 E.	3rd St., Larned				
2 WA	ATER WELL OWNER: Pawnee Co	ounty Coop			
RR : City,	#, St. Address, Box #: 103 E. 3rd , State, ZIP Code : Larned, KS		Board of Agriculture Application Number	, Division of Water Resource:	es
3 MARK WELL'S LOCATION WITH 4 DEPTH OF WELL					
AN	I "X" IN SECTION BOX:	WELL'S STATIC WATER LEVEL 19.42 ft.			
	N T	WELL WAS USED AS:			
		1 Domestic	5 Public Water Supply	9 Dewateri	na
		2 Irrigation	6 Oil Field Water Supp	ly Monitorin	g Well
w	E	3 Feedlot 4 Industrial	7 Domestic (Lawn & G 8 Air Conditioning		Well
		Min	-iiiiuiuiu-		
	-sw - se X	Was a chemical / bacteriological sample submitted to Department? Yes			
	S				
5 TY	PE OF BLANK CASING USED:				
		rought 7 Fiberglands 7 Fiberglands 8 Concre		elow)	
					ch
	ank casing diameter2 in. asing height above or below land su	Was casing pulled?		II yes, now mu	all
6 GR	ROUT PLUG MATERIAL: 1 N	leat cement 2 Cement gro	ut	OtherNative soil	
	Grout Plug Intervals: From				
Wh	nat is the nearest source of possible	e contamination:			
Septic tank Sewer lines Watertight sewer lines		6 Seepage pit 11 Fuel storage 16 Other (specify below 7 Pit privy 12 Fertilizer storage		•	
4 Lateral lines 5 Cess pool		9 Feedyard 10 Livestock pens	14 Abandoned water v15 Oil well/Gas well	vell	
Dia	rection from well?	How many	feet?		
FROM	TO PL	UGGING MATERIALS			
0	3 Native soil		Casing remove	ed to 3' bgs	
3	24.6 Bentonite (2")				
			K2		
**************************************			KDHE #U1 07:	3 00061 / GeoCore #127	3
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7 CO	ONTRACTOR'S OF LANDOWN	ER'S CERTIFICATION: This 3/22/2007	s water well was plugged and this record is true	under my jurisdiction a to the best of my knowle	nd was completed on dge and belief. Kansas
Wa	ter Well Contractor's License No	527	This Wa	ter Well Record was com	oleted on (mo/day/year)
by	(signature)	COURTE OF THE COLLEGE OF	Secret Date		
INSTRU	CTIONS: Use typewriter or bat	l point pen. Please press fir	mly and print clearly. Plea	se fill in blanks, underlin	e or circle the correct
answers	. Send top three copies to Kan	sas Department of Health a	nd Environment, Bureau o	of Water, Geology Section	on, 1000 SW Jackson
St., Ste.	420, Topeka, Kansas 66612-1	367. Telephone: 785/296-55	22. Send one to Water W	reli Owner and retain on	a for your records.