		WATER WELL PLUGGING R	ECORD Form WWC-5P	KSA 82a-1212 ID N	NO. 00088659
1 LOCA	TION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County:	Pawnee	NE14 SE 14 SE 14	32	21	16 EW
Distance and direction from nearest town or city street address of well if located within city?					
103 E. 3rd St., Larned					
2 WATER WELL OWNER: Pawnee County Coop					
RR #, St. Address, Box #: 103 E. 3rd Street Board of Agriculture, Division of Water Resources City, State, ZIP Code : Larned, KS 67550 Application Number:					
3 MARK WELL'S LOCATION WITH 4 DEPTH OF WELL					
AN "X" IN SECTION BOX: WELL'S STATIC WATER LEVEL17.9 ft.					
WELL WAS USED AS: 1 Domestic 5 Public Water Supply 9 Dewateri					ring
		2 Irrigation	6 Oil Field Water Suppl	y Monitori	ng Well
w	E	3 Feedlot 4 Industrial	7 Domestic (Lawn & Ga8 Air Conditioning	•	Well
Was a chemical / bacteriological sample submitted to Department? Yes					
SW SE X If yes, mo/day/yr sample was submitted to Department? Yes					
Water Well Disinfected: Yes No					
S					
5 TYPE OF BLANK CASING USED:					
1 Steel 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (Specify below) ● PVC 4 ABS 6 Asbestos-Cement 8 Concrete Tile					
Blank casing diameter2 in. Was casing pulled? Yes No					
Casing height above or below land surface					
GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout Bentonite OtherNative.soil					
What is the nearest source of possible contamination:					
	Septic tank	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 storage 13 Insecticide storage	***************************************	
4 Lateral lines		9 Feedyard	14 Abandoned water w	vell	
5 Cess pool 10 Livestock pens 15 Oil well/Gas well					
Direction from well? How many feet?					
FROM	TO PL	UGGING MATERIALS			
0 3 Native soil		Casing removed to 3' bgs			
3 24.3 Bentonite (2")					
			K6		
KDI		KDHE #U1 073	KDHE #U1 073 00061 / GeoCore #1278		
7 CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on					
(mo/day/year)					
4/5/2007 under the business name of Geocore Inc.					
by (signature)					
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 St., Ste. 420, Topeka, Kansas 66612-1367. Telephone: 785/296-5522. Send one to Water Well Owner and retain one for your records.					