193			ell No. 4	PECADA	Form WV	/C-5P	KSA 82:	a_1212 II	NO.			
	CATION C	F WATER	WELL:	Fraction		Section	Number	Township N	umber	Range Numb		
	County:	Pawn dress of Wel		unknown, dista	4 NC 1/4 NE 1.		33 sitioning S	T 22 Systems (GPS	S ) inform	17 ation:	E XW	
dir	ection from r			n: If at owner's		Latitude: 38.09781 (in decimal degrees) Longitude: -99.191346 (in decimal degrees)						
1	eck here	4.5		S!	مد ۲۰۰۰	Elevation: Unknown						
1				3 miles east	of Garrield.	Datum: WGS84, NAD83, NAD27 Collection Method:						
	ATER WEI R#, St. Addr		R:Austin H 5005 We	errmann		☐ GPS unit (Make/Model: WAAS ☐ Digital Map/Photo, ☐ Topographic Map, ☐ Land Survey						
	ty, St. Addit			onio, TX 78	213	1						
Est. Accuracy:											15 m	
3	MARK WI WITH AN			1		ft.						
	BOX:	N		WELL'S STATIC WATER LEVEL 9 ft								
WELL WAS USED AS:									<b>-</b>			
							☐ Public Water Supply ☐ Dewatering ☐ Monitoring					
	w H		Е	☐ Feed	dlot	☐ Domestic (Lawn & Garden) ☐ Injection Well ☐ Air Conditioning ☐ Other ☐						
	SV	V  SE 				iological sample submitted to Department? Yes No						
		S		was a c	nemical/bacter	iological sar	npie submi	ited to Depart	ment? Y	es 🔲 No 🛭	צ	
5												
Steel RMP (SR) Wrought Fiberglass Other (Specify below)												
	PVC ABS Asbestos-Cement Concrete Tile											
	Blank casing diameter 8 in. Was casing pulled? Yes No No If yes, how much											
	Casing height above or below land surface. 48 in.											
6	GROUT P	LUG MAT	ERIAL:	Neat cem	ent $\square_{Cem}$	ent grout	Bentor	nite Oth	ner			
	Grout Plug	Intervals	From 4							to		
	What is the nearest source of possible contamination:  ☐ Septic tank ☐ Seepage pit ☐ Fuel Storage ☐ Other (specify below)											
	Sewer lines Pit privy Fertilizer storage None Known											
	☐ Lateral lines ☐ Feedyard ☐ Abandoned water well ☐ Direction from well?											
	☐ Cess p	ool		ivestock pens	s ∐Oil w	ell/Gas well	но	w many teet?				
	FROM	TO		GGING MAT	ERIALS	FROM	TO	PLU	GGING	MATERIALS		
	0 4	14	Compact Bentonite						· · · · · · · · · · · · · · · · · · ·			
	14	30	Chlorinat									
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 11/07/14 and this record is true to the best of my knowledge and belief. Kansas Water												
Well Contractor's License No. 185 . This Water Well Record was completed on (mo/day/year) 11/12/14 under the business name of Clarke Well & Equipment, Inc. by (signature)												
INS	TRUCTIO ect answers	NS: Use type type is a second to be	pewriter or b hree copies	oallpoint pen. to Kansas Der	Please press fi	rmly and pri alth and Env	nt clearly. I ironment. I	Please fill in l Bureau of Wat	olanks, u er, Geol	nderline or circ ogy Section, 10	le 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: 785/296-5524. Send one to Water Well Owner and retain one for your records. Visit us at <a href="http://www.kdheks.gov/waterwell/l~ndex.html">http://www.kdheks.gov/waterwell/l~ndex.html</a> .												
1600	rus. visit us	at nup.//w	www.kuiicks.	ov/ water well/	i mucamum.							