			WATER WELL PLUGGING R	ECORD Form WWC-5P	KSA 82a-1212 ID N	10	
1 LOCATION OF WATER WELL:			Fraction	Section Number	Township Number	Range Number	
County: Pawnee			NW14 NW 14 NE 14	8	22	18 <b>g</b> /w	
Distance and direction from nearest town or city street address of well if located within city?							
1½ S	outh, 1/8	West of S	anford				
2 WATE	ER WELL OWN	NER: XXXX A	lan Converse				
	RR #, St. Address, Box #: 2216 J Road City, State, ZIP Code : Garfield, Ks. 67529 Board of Agriculture, Division of Water Resources Application Number: 16049						
3 MARK WELL'S LOCATION WITH 4 DEPTH OF WELL							
AN ">	(" IN SECTION	I BOX:	WELL'S STATIC WATER LEVEL 34 ft.				
	ı X		WELL WAS USED AS:				
	144	NE			. O Dowatavi	in a	
N	W — — —	— NE ———	1 Domestic 2 Irrigation	<ul><li>5 Public Water Supply</li><li>6 Oil Field Water Supple</li></ul>	oly 10 Monitorin		
w		E	3 Feedlot 4 Industrial	7 Domestic (Lawn & G 8 Air Conditioning		Well	
				•			
	SW ————————————————————————————————————						
	S	10.10	Water Well Disinfected: Ye	esHIH No			
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 Casir	c casing diame	ter16 in. e_or below land su	Was casing pulled?	Yes No	X If yes, how mu	ch	
6 GRO	UT PLUG MAT	ERIAL: 1 N	eat cement 2 Cement gro	ut 3 Bentonite 4 0	Otherholeplu	0	
Grout Plug Intervals: From							
What is the nearest source of possible contamination:							
1 Septic tank			6 Seepage pit	11 Fuel storage	16 Other (spe	cify below)	
2 Sewer lines 3 Watertight sewer lines			7 Pit privy 8 Sewage lagoon	<ul><li>12 Fertilizer storage</li><li>13 Insecticide storage</li></ul>	<u>NOLIE</u>		
4 Lateral lines 5 Cess pool			9 Feedyard 10 Livestock pens	14 Abandoned water v			
	·	·	•	15 Oil well/Gas well feet?			
FROM	ТО	PL	UGGING MATERIALS				
110 34 Chlorinat			ed gravel				
34	0	Hole plug	5				
7 CONTRACTOR'S QF_LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on							
(mo/day/year)							
Water Well Contractor's License No							
by (signature)							
INSTRUCT	TONS: Use to	pewriter or ball	point pen. Please press firm	mly and print clearly. Plea	se fill in blanks, underline	e or circle the correct	
			as Department of Health at 67. Telephone: 785/296-55				