			WATER WELL PLUGGING R	ECORD Form WWC-5P	KSA 82a-1212 ID N	IO00347310	
1 LOCATION OF WATER WELL:			Fraction	Section Number	Township Number	Range Number	
County:	Ren	0	SW4 NW4 NW4	16	22	4 E/W	
Distance and			city street address of well if loca	ated within city?			
730 N. Bu	hler Road, B	uhler					
RR #, \$		NER: Unified Sch 730 N. Buh ox #: Buhler, KS	ler Road	Board of Agriculture Application Number	, Division of Water Resour	ces	
3 MARK WELL'S LOCATION WITH			4 DEPTH OF WELL ft.				
AN "X	" IN SECTION	I BOX:	WELL'S STATIC WATER LEVEL				
X	N	NE	WELL WAS USED AS:  1 Domestic 5 Public Water Supply 9 Dewatering				
	Ĭ	NE	2 Irrigation	6 Oil Field Water Supp	ly 10 Monitorii	ng Well	
w		E	3 Feedlot 4 Industrial	7 Domestic (Lawn & Ga 8 Air Conditioning	arden) 11 Injection Cother So	Well oil vapor extraction	
s	W	SE		Was a chemical / bacteriological sample submitted to Department? Yes			
	Water Well Disinfected: Yes No						
- TYPE		ACING LICED:					
TYPE OF BLANK CASING USED:							
1 Ste		MP (SR) 5 Wro IS 6 Ast	ought 7 Fibergia pestos-Cement 8 Concret		eiow)		
		ter4 in. e or below land su	Was casing pulled?		If yes, how mu	ich15'.*	
GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout  Bentonite OtherNative soil							
	Plug Intervals	: From source of possible		, Fromft. to	)19 ft., From	to ft	
, ,	Septic tank	source or possible	6 Seepage pit	11 Fuel storage	16 Other (spe	cify helow)	
2 Sewer lines			7 Pit privy	12 Fertilizer storage			
3 Watertight sewer lines 4 Lateral lines			8 Sewage lagoon 9 Feedyard	<ul><li>13 Insecticide storage</li><li>14 Abandoned water w</li></ul>			
5 (	Cess pool		10 Livestock pens	15 Oil well/Gas well			
Direc	tion from well?	?	How many	feet?			
FROM TO PL			UGGING MATERIALS				
0	0 2 Native soil			*Drilled out to 1	15'		
2	15	Bentonite (8")					
	1			SVE2			
<u> </u>				GeoCore #81			
	1						
(mo/d	ay/year)		R'S CERTIFICATION: This 7/11/2006	and this record is true	to the best of my knowle	edge and belief. Kansas	
Water	Well Contracto	r's License No	527 ອ business name of Gອຄວດດາ	This Wat	ter Well Record was com	pleted on (mo/day/year)	
by (si	gnature)						
INSTRUCT	IONS: Use t	ypewriter or ball	point pen. Please press firr	nly and <u>print</u> clearly. Pleas	se fill in blanks, underlin	e 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.