WATER WELL PLUGGING RECORD Form WWC-5P KSA 82a-1212 ID NO.							
1	LOCATION OF WATER WELL: Fraction County: Reno SE 1/4	SW 1/4 NE 1/4 NW 1	/4	Number 15	Township Number T 22 S		
	Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here			Global Positioning Systems (GPS) information: Latitude: 38.14124 (in decimal degrees) Longitude: 98.08053 (in decimal degrees) Elevation: Datum: WGS84, NAD83, NAD27 Collection Method:			
2	WATER WELL OWNER: Smoky Hill LLC RR#, St. Address, Box #: 645 E. Crawford City, State ZIP Code: Salina Kansas 67401			GPS unit (Make/Model: Garmin csx Digital Map/Photo,  Topographic Map,  Land Survey			
City, State ZIP Code: Salina, Kansas 67401 Est. Accuracy: $\square < 3 \text{ m}$ ,						5-15 m,	
3 W.	MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:    N						
	Was a chemical/bacteriological sample submitted to Department? Yes ☐ No ✓						
5	5 TYPE OF BLANK CASING USED:						
	Steel RMP (SR) Wrought Fiberglass Other (Specify below)  Asbestos-Cement Concrete Tile  Blank casing diameter 8 in. Was casing pulled? Yes No If yes, how much 29  Casing height above or below land surface in.						
6	GROUT PLUG MATERIAL: Neat cement Cement grout Bentonite Other Sand  Grout Plug Intervals: From 29 ft. to 8 ft., From 8 ft. to 0 ft., From to ft.						
	What is the nearest source of possible contamination:  Septic tank Seepage pit Fuel Storage Fertilizer storage  Watertight sewer lines Lateral lines Feedyard Cess pool  What is the nearest source of possible contamination:  Fuel Storage Fertilizer storage Insecticide storage Abandoned water well Oil well/Gas well How many feet? 10						
	FROM TO PLUGGING M	IATERIALS	FROM	ТО	PLUGGING	MATERIALS	
	0 8 Benonite						
	8 29 Sand						
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 11-17-10 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 134 and this record was completed on (mo/day/year) 11-19-10 under the business name of Rosencrantz-Bemis Ent. by (signature) human Dadam							
INSTRUCTIONS: Use typewriter or ballpoint 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: 785/296-5524. Send one to Water Well Owner and retain one for your records. Visit us at http://www.kdheks.gov/waterwell/index.html.  Check one:  White Copy Blue Copy Pink Copy							
Check one: White Copy Blue Copy Pink Copy							