WATER W	ELL PLU	J GGING F	RECORD	Form WW	C-5P	KSA 82:		
1 LOCATIO County: R	N OF WATE	ER WELL:	Fraction sw 1/4 sw	1/4 NE 1/4 NW !	/4	Number 15	Township Number T 22 S	7 DE 7 W
Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here						38.14184 : 98.0811:	ystems (GPS) inform 3 NAD83,	(in decimal degrees) (in decimal degrees)
2 WATER WELL OWNER: Smoky Hill LLC RR#, St. Address, Box #: 645 Craeford Street					Collection Method: GPS unit (Make/Model: Garmin csx Digital Map/Photo, Topographic Map, Land Survey			
City, State ZIP Code: Salina, Kansas 67401 $\underline{\text{Est. Accuracy:}} \ \square < 3 \text{ m}, \ \square 3-5 \text{ m}, \ \square 5-15 \text{ m}, \ \square > 15 \text{ m}$								
3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX: N								
5 TYPE OF BLANK CASING USED:								
Steel RMP (SR) Wrought Fiberglass Other (Specify below) ABS Concrete Tile Blank casing diameter 10 in. Was casing pulled? Yes No If yes, how much 28 Casing height above or below land surface in.								
6 GROUT PLUG MATERIAL: Neat cement Cement grout Bentonite Other Sand Grout Plug Intervals: From 28 ft. to 9 ft., From 9 ft. to 0 ft., From to ft. What is the nearest source of possible contamination: Septic tank Seepage pit Fuel Storage Other (specify below) Fertilizer storage Watertight sewer lines Sewage lagoon Insecticide storage								
Lateral lines Feedyard Abandoned water well Direction from well? North Cess pool Livestock pens Oil well/Gas well How many feet? 6								
FROM	ТО		GING MATI		FROM	ТО		MATERIALS
0	9	Benonite						
9	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 This Water Well Record was completed on (mo/day/year) 11-19-10 under the business name of Rosencrantz-Bemis Ent. by (signature) 11-19-10 under the business name of Rosencrantz-Bemis Ent. by (signature) 11-19-10 under 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								