	WATER WELL PLUGGING RE	CORD Form WWC-5P	KSA 82a-1212 ID N	0
1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: Havey	MANE/AM/A	19	238	E/ (
Distance and direction from nearest town or o	city street address of well if local	ted within city?	- 0 4/0/5	10001100
2.5 m	ills Nand 1.	25 miles E	- OF 17018	read, KS
2 WATER WELL OWNER: City C	MUSTERUI			
RR #, St. Address, Box #: 303 City, State, ZIP Code : Hall	teach, KS L	Board of Agriculture Application Number:	, Division of Water Resource: 344000 3	46291
MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4 DEPTH OF WELL	tt.		
N		TLEVEL		
	WELL WAS USED AS:			
NW NE	1 Domestic	5 Public Water Supply6 Oil Field Water Supple		5
W	3 Feedlot 4 Industrial	7 Domestic (Lawn & Ga 8 Air Conditioning	arden) 11 Injection	Lecreational
		•		
SE	Was a chemical / bacteriolog If yes, mo/day/yr sample was	ical sample submitted to De s submitted	partment? Yes	۱٥ ، ۸.۰ ۱
	Water Well Disinfected: Yes	X. No		
S	Trailor Troil Diominosiour			
5 TYPE OF BLANK CASING USED:		•		
` '	ought 7 Fiberglas bestos-Cement 8 Concrete	`	elow)	
Blank casing diameter 8 in.	Was casing pulled?		X If yes, how mu	ch
Casing height above of below land su	irface ir	n.	n you, now ma	311
0	eat cement 2 Cement grou		Other	
Grout Plug Intervals: From	•	Fromft. to	ft., From	to ft.
What is the nearest source of possible 1 Septic tank	6 Seepage pit	11 Fuel storage	6 Other (spe	cify helow)
2 Sewer lines	7 Pit privy	12 Fertilizer storage		JWEII
3 Watertight sewer lines4 Lateral lines	8 Sewage lagoon9 Feedyard	13 Insecticide storage14 Abandoned water w		
5 Cess pool	10 Livestock pens	15 Oil well/Gas well		
Direction from well? LCLS	How many f	feet?IO		
FROM TO PL	UGGING MATERIALS			
0 3 700 8	Dil			
3 34 BONA	mite			
34 107 (100 n	COUSE San	1		
107 1210 From to	ion sand (casi	on calle me	1	
1011201011101	On our tradi	ng collapse!)	
7 CONTRACTOR'S OF LANDOWNE	ER'S CERTIFICATION: This	water well wee street	under my juriedistics	nd was completed a
(mo/day/year)Q.109	720	and this record is true	e to the best of my knowle	dge and belief. Kansas
Water Well Contractor's License No U under the	Susiness name of Pre		ter Well Record was comp	oleted on (mo/day/year)
by (signature)	klichenbergin)		
INSTRUCTIONS: Use typewriter or ball point 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: 785/296-5522. Send one to Water Well Owner and retain one for your records.				