WATER WELL PLUGGING RECO	ORD Form WWC-	5P KSA 82a-12	12 ID NO.	35/66
1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	
County: Pawnee	NE 1/4 SE 1/4 SE 1/4	8	23	17 ½ /W
Distance and direction from nearest town or city street address of well if located within city?				
2// Courth 2 Foot of Comfiel	A			
3/4 South, 2 East of Garfield 2 WATER WELL OWNER: Alan Converse Global Positioning Systems (decimal degrees, min. of 4 digits				
2216 J Road		Latitude:		
RR#, St. Address, Box #: Garfield, Ks. 67529		Longitude:		
, , , , , , , , , , , , , , , , , , , ,		Elevation:		
City, State ZIP Code:		Datum:		
		Data Collection Method:		
3 MARK WELL'S LOCATION 4	DEPTH OF WELL	$39\frac{1}{2}$ ft.		
WITH AN "X" IN SECTION				
BOX: WELL'S STATIC WATER LEVEL 19 ft				
N WELL WAS LIGED AS.				
WELL WAS USED AS:				
NW NE 1 Domestic 5 Public Water Supply 9 Dewatering				
	2 Irrigation	6 Oil Field Water Sup	ply 10 Mon	
W E	3 Feedlot	7 Domestic (Lawn &	Garden) 11 Injec	
SW SE	4 Industrial	8 Air Conditioning		er
	Was a chemical/bacterio	ological sample submitte	ed to Department? Y	es No <u>X</u>
S				
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 casing diameter <u>16</u> in. Was casing pulled? Yes No X If yes, how much				
Casing height above or below land surface 48 in.				
6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other				
Grout Plug Intervals: From 19 ft. to 4 ft., From ft. to ft., From to ft.				
Grout Plug Intervals: From 19 ft. to 4 ft., From ft. to ft., From ft., From ft.				
What is the nearest source of possible contamination:				
1 Septic tank 6 Seepage pit 11 Fuel Storage 16 Other (specify below)				
2 Sewer lines 7 Pit privy 12 Fertilizer storage None				
3 Watertight sewer lines 8 Sewage lagoon 13 Insecticide storage				
4 Lateral lines 9 Feedyard	14 Abandoned	water well Direction	from well?	
5 Cess pool 10 Livestock	pens 15 Oil well/Ga	s well How man	ny feet?	
EDOM TO DI LICCINI	CMATERIALC	TO TO	DILLOCONO M	ATEDIALC
		FROM TO	PLUGGING MA	A I EKIALS
39½ 19 Chlorinated	gravel			
19 4 Cement				
4 0 Top soil				
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was				
completed on (mo/day/year) 4-2-10		is true to the best of a		
Well Contractor's License No. 134 This Water Well Record was completed on (mo/day/year) 4-16-10 under the				
business name of Rosencrantz- Bemis by (signature) Kora Alex				
INCORDICATIONS II		-	_	anlina an air-15 d
INSTRUCTIONS: Use typewriter or ballpoi	nt pen. Please press firmly	y and print clearly. Plea	ase fill in blanks, und	
INSTRUCTIONS: Use typewriter or ballpoi correct answers. Send top three copies to Kan Jackson St., Ste. 420, Topeka, Kansas 66612-1	nt pen. Please press firmly sas Department of Health	y and print clearly. Plea and Environment, Bure	ase fill in blanks, und au of Water, Geology	y Section, 1000 SW