			TER WELL	PLUGGING RECO	ORD Fo	orm WWC-5P KSA	ID NO				
1	LOCATION OF WATER WELL:	1	Fraction		Section	on Number	Township	Number	Range	Number	
Cou	inty: HARVEY	SV	V ¹ ∕4 NE	1/4 SW 1/4		6		23S		3W	
	ance and direction from nearest	•	•			-					
	FROM BURRTON, KANSA				4 MILE	S WEST, 1/4	MILE NOF	RTH			
2	WATER WELL OWNER:		STROBE								
	RR #, St. Address, Box #: City, State, ZIP Code :		N HENDR INSON,	KS 67502		Board of Agriculture Application Number:			S		
3	MARK WELL'S LOCATION WIT	H 4	\sqcup								
_	N		WELL'S STATIC WATER LEVEL7 ft.								
			WELL WAS USED AS: 1 Domestic 5 Public Water Supply 9 Dewatering 2 Irrigation 6 Oil Field Water Supply 10 Monitoring Well								
-	N W N E	_									
	1 1										
w		— E	3 Feedlot 7 Domestic (Lawn & Garden) 11 Injection Well 4 Industrial 8 Air Conditioning 12 Other								
ŀ	Was a chemical / bacteriological sample submitted to Department?Yes)Ω		
L	Water Well Disinfected: YesX No										
5	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 diameter6 Casing height XIXXXXX belo			casing pulled?		No	X If	yes, how m	uch		
٦							Oth				
6	GROUT PLUG MATERIAL: Grout Plug Intervals:	1 Neat 21		2 Cement gro		Bentonite 4	Other ft.				
	What is the nearest source	of possible	contamir	nation:							
	1 Septic tank		6 Seepage pit			11 Fuel storage 16 Other (specify below) 12 Fertilizer storage					
:	2 Sewer lines 3 Watertight sewer lines		7 Pit privy 8 Sewage lagoon								
	4 Lateral lines		9 Feedyard 14 Abandoned water well								
	5 Cess Pool	T 0 CA		tock pens	<u>15</u>		_	IPELINES			
	Direction from well?	T & SO		How man	y feet?	WITHIN 500					
F	ROM TO	PLUGG	ING MATE	RIALS							
	40 0 0		AUTTE 1101 ED1 110			— 2ND OF TWO WELLS.					
		<u>NIUNIII</u> PSOIL	E HOLEPLUG						CANDDO) T NIT	
	3 0 10	PSUIL				INSIDE CA					
						COLLAPSED		OF SAND			
					ŀ	UNKNOWN.		E BELOW (IAS	
						OPENED TO	DEPTH O	F 13' BL:	S.		
				·							
,		· · · · · · · · · · · · · · · · · · ·									
7	CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed and (mo/day/year) and this record is true to the best of my knowledge and belief. Kansas vater Well Contractor's License No. NA. This Water Well Record was completed on (mo/day/year)										
	Water Well Contractor's Licens	se No	NA		and	This	Water Well Re	ecord was con	npleted on (m	no/day/year)	
	Water Well Contractor's License X 10 -19-0 u	inder the bi	usiness na	ame of	NA			•••••			
			<u> </u>								
an	STRUCTIONS: Use typewrinswers. Send top three copi	es to Kan	sas Depa	artment of Hea	alth and	Environment, Bu	ease fill in bla ireau of Wat	nks, underlir er, Topeka,	ne or circle Kansas 66	the correct 620-0001.	
ıе	lephone: 785/296-3565. Send	one to vvate	er vveli Ov	vner and retain o	ne tor yo	ur recoras.					