				WATER WELL PLUGGING RECO	RD Form WWC-5P KSA	182a-1212 ID NO		
1	LOCAT	ION OF WATE	R WELL:	Fraction	Section Number	Township Number	Range Number	
County: HARVEY			T T T T New York Trans.	NW 1/4 NW 1/4 SW 1/4	24	235	3W	
	stance and			city street address of well if lo NORTH OF BURRTON		1	<u> </u>	
2	WATER	WELL OWNE		N SCHMIDT				
		Address, Box e, ZIP Code	#: TNMAN	N WHEATSTATE RD , KANSAS 67546	Board of Agriculture, Application Number:	, Division of Water Resource	s	
3	MARK WELL'S LOCATION WITH 4 DEPTH OF WELL							
	WELL'S STATIC WATER LEVEL ft. PERCHED WATER TABLE							
				WELL WAS USED AS:	WELL WAS USED AS:			
	- N	w —	— N E	1 Domestic	5 Public Water Supp		•	
				2 Irrigation 3 Feedlot	6 Oil Field Water Su 7 Domestic (Lawn 8		ring Well on Well	
·W	χ		E	4 Industrial	8 Air Conditioning			
	Was a chemical / bacteriological sample submitted to Department?Yes							
			1	If yes, mo/day/yr sampl	e was submitted			
		 S		Water Well Disinfected:	Yes NoX			
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 diameter8in. Was casing pulled? YesX No If yes, how muchALL Casing height above or below land surface in.							
6	GROUT	GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other						
	Grout I	Grout Plug Intervals: From						
	What is the nearest source of possible contamination:							
2 S 3 V		eptic tank ewer lines		6 Seepage pit7 Pit privy	11 Fuel storage 16 Other (specify below) 12 Fertilizer storage			
		atertight sew	er lines	8 Sewage lagoon 9 Feedvard				
		ateral lines ess Pool		10 Livestock pens	15 Oil well/Gas we	II		
	Direction from well? SOUTH How many feet? APPROXIMATELY 550							
FROM		то		GGING MATERIALS				
	19.5	10	ACUITEED E	ORMATION MATERIAL				
	10.3	2		HOLEPLUG				
	2	0	TOPSOIL	HOLLI LOG				
		U	1073011		<u></u>			
_1			00.14110.0000	EDIO OEDITIONE				
CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and wa on (mo/day/year) $10/.17/.01$ my knowledge and the condition of the best of my knowledge and the condition of the best of my knowledge.							dge and belief. Kansas	
CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) .10/.17/.01 and this record is true to the best of my knowledge and belief. Kans water Well Contractor's License No. This Water Well Record was completed on (mo/day/year) .10/.10/							npleted on (mo/day/year)	
	by (sign	nature) . 🛴	Jordan	Schmidt				
11	ISTRUC	TIONS: Use	typewriter or ba	all point pen. Please press fi	rmly and print clearly. Ple	ease fill in blanks, underli	ne or circle the correct	
а	nswers. S	Send top thi	ree copies to K	ansas Department of Heal /ater Well Owner and retain or	th and Environment, Bu	reau of Water, Topeka,	Kansas 66620-0001.	