(to rectify lacking or incorrect information)						
Location listed as:	County: Reno Location changed to:					
Section-Township-Range: 18-235-1 W	18-235-5W					
Fraction ( 1/4 1/4 1/4): NW NW 5E	NW NW NW SE					
Other changes: Initial statements:						
Changed to:						
Comments:	<del> </del>					
verification method: Latitude & longitude given	on other plugging records for					
wells in this series, KGS "LEO" conversion						
street map, and mapping tool on KGS w						
submitted by: Kansas Geological Survey, Data Resources Library, 1930 Co to: Kansas Dept of Health & Environment, Bureau of Water, 1000 SW Jack						

DUSSIN MW-1 10NO. 00802157

WATER WELL PLUGGING RECORD

Form WWC-5P

KSA 82a-1212

1	LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number		
Co	ounty: Renu	NW 4 NW 4 SE 14	18	235	1 (2)		
Distance and direction from nearest town or city street address of well if located within city?							
2 WATER WELLOWNER: C3F Auto Repair							
	RR #, St. Address, Box #: 928 2	Ave A  Board of Agriculture, Division of Water Resources  Application Number:					
3	MARK WELL'S LOCATION WITH	4 DEPTH OF WELL	20 ft				
	AN "X" IN SECTION BOX:  WELL'S STATIC WATER LEVEL						
		WELL WAS USED AS:	JSED AS:				
w	N W	1 Domestic 2 Irrigation 3 Feedlot 4 Industrial	<ul><li>5 Public Water Supp</li><li>6 Oil Field Water Sup</li><li>7 Domestic (Lawn &amp; Air Conditioning</li></ul>	oply 10 Monito Garden) 11 Injectio	ering vring Well on Well		
Was a chemical / bacteriological sample submitted to Department?Yes							
	S	Water Well Disinfected: Yes No					
5	TYPE OF BLANK CASING USED:	J					
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							
Casing height above or below land surface							
Grout Plug Intervals: From							
	What is the nearest source of possible contamination:  1 Septic tank 6 Seepage pit 11 Fuel storage (16) Other (specify below)						
	<ul><li>2 Sewer lines</li><li>3 Watertight sewer lines</li><li>4 Lateral lines</li><li>5 Cess Pool</li></ul>	7 Pit privy 8 Sewage lagoon 9 Feedyard 10 Livestock pens	12 Fertilizer storage 13 Insecticide stora 14 Abandoned wate 15 Oil well/Gas well	nge CONTA er well	miraledsile		
Direction from well? How many feet?							
FROM TO PLUGGING MATERIALS							
	0 3 surfaces	oils (1.2813)					
	3 20 tentonil	2 ((-8)13)					
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. SSS. This Water Well Record was completed on (mo/day/year) under the business name of t							
0 1 21							
INSTRUCTIONS: Use typewriter or ball point pen. <u>Please press firmly</u> and <u>print</u> 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, Topeka, Kansas 66620-0001. Telephone: 785/296-3565. Send one to Water Well Owner and retain one for your records.							