			WATER WELL PLUGGING RECO	RD Form WWC-5P KS	A 82a-1212	ID NO	
1 1004	ION OF WATER	R WELL:	Fraction	Section Number	Township	Number	Range Number
J 4	$\supset$	TO WELL.	SW4NW4NW4	8	33		5w
	Teno	nearest town	or city street address of well if lo		1 00	<u> </u>	<u> </u>
140			e, Hutchinson	Ks.			
	WELL OWNER		Associates, UC	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
 RR #, St.	Address, Box #		Regency Parkway	Board of Agriculture			es
City, Stat	te, ZIP Code	: Oma	ha, NE 66114	Application Number	45,53	7	
	WELL'S LOCAT		4 DEPTH OF WELL				
	N		WELL'S STATIC WATER	1 LEVEL 1.3 ft.			
			WELL WAS USED AS:				
X N	w	- N E	1 Domestic	5 Public Water Sup	ply	9 Dewat	ering
			2 Irrigation 3 Feedlot	<ul><li>6 Oil Field Water S</li><li>7 Domestic (Lawn</li></ul>			oring Well on <u>Well</u>
w			E 4 Industrial	8 Air Conditioning		12 Other	
	w		Was a chemical / bacteri	iological sample submitt	ed to Departm	ent?Yes	No <b>X</b>
5	1	- S E	If yes, mo/day/yr samp				
	s		Water Well Disinfected:	Yes 🔏 No			
T/DE							
	OF BLANK CAS						
1 Ste 2 PV			Wrought 7 Fiberg Asbestos-Cement 8 Concre	, ,	ty below)		
Blank	<del>-</del> casing diamet	ter <b>1.</b> i	in. Was casing pulled?		<b>X</b> If :	yes, how m	uch
Casing	g height above	or below la	nd surface36				
6 GROU	T PLUG MATE	RIAL: 1	Neat cement 2 Cement grow	ut 3 Bentonite 4	Other Hele!	lug-San	d-Dirt
Grout	Plug Intervals	: From	55 ft to 15 ft	, From 15 ft.	toft.,	From	.4 to ft.
_		source of po	ossible contamination:				
1 Septic tank 2 Sewer lines			6 Seepage pit 7 Pit privy	<ul><li>11 Fuel storage</li><li>12 Fertilizer stora</li></ul>		, ,	ecify below)
3 Watertight sewer lines			8 Sewage lagoon	13 Insecticide sto		***************************************	
4 Lateral lines 5 Cess Pool			9 Feedyard 10 Livestock pens	14 Abandoned wa 15 Oil well/Gas w			
Direc	tion from well	12	·	y feet?			
	I			7			
FROM	то		LUGGING MATERIALS				
	4	Dirt	<b>.</b>				
4	15	Holel	lug				
15_	55	Sand	-				
7 CONT	RACTOR'S C	OR LANDOV	VNER'S CERTIFICATION: Th	is water well was plug	ged under my	jurisdictio	n and was completed
on (me Water ِ۱	o/day/year) We <u>ll</u> Cont <u>ra</u> ctor	r's License No	134 /	and this record is tru	ie to the best of s Water <b>W</b> ell Red	my knowle	edge and belief. Kansas mpleted on (mo/dav/vear)
7	- 8-05	under	the business name of Rose	escrenty Ben	ris Est.		
by (sig	nature)						
INSTRUC	TIONS: Use	typewriter o	r ball point pen. <u>Please press f</u> o Kansas Department of Hea	irmly and print clearly. Pl	ease fill in blan	ks, underli	ne or circle the correct
Telephone	: 785/296-356	5. Send one to	o Water Well Owner and retain o	ne for your records.	Or THAIC	., iopona,	