			WATE	R WELL PLUGGING	RECORD I	Form WWC-5P	KSA 82a	-1212 ID N	10	·
1 LOCA	LOCATION OF WATER WELL:		Fraction		Section	Section Number		Number	Range	Number
County:	Keno		SW	5W1/25W1/4		0	2	3 S	_5	EW
PPC 2 WATI RR #, City, S 3 MAR AN "2	d direction from	ly 100 HER: Cit X #: P.O. Hute ATION WITH	or city stre F A A A A A A A A A A A A	et address of well if lo	Son Boa Soy App FER LEVEL 5 Publi 6 Oil F 7 Dom	rd of Agriculture lication Number	e, Division of r:	P. Inter	MW - ing ng Well Well	, Hutchia
*	sw s	SE	If ye	a chemical / bacteric s, mo/day/yr sample o er Well Disinfected:	was submitted			és	No	
5 TYPE	E OF BLANK C	ASING USED:								
Casi	4 AB k casing diame ng height above	ter in below known	surface	Was casing pulled?	rete Tile Yes . in.		4	If yes, how mu		
0	UT PLUG MAT t Plug Intervals		Neat cen					ft., From		ft
What	is the nearest	source of poss	sible contar	mination:						
2 3 4 5	Septic tank Sewer lines Watertight sew Lateral lines Cess pool	_	7 8 9	Seepage pit Pit privy Sewage lagoon Feedyard Livestock pens How ma	12 Fel 13 Ins 14 Ab 15 Oil	11 Fuel storage 12 Fertilizer storage 13 Insecticide storage 14 Abandoned water well 15 Oil well/Gas well 17:			con ta	minakdn
FROM	ТО		PLUGGIN	G MATERIALS						
64	3	Bento	nite	Holeph	19	Lat	38,	058	081	
3	0	1 of	soil			Lon				
7 CON (mo/- Wate by (s	ITRACTOR'S day/year)r Well Contractor signature)	OF LANDOV	VNER'S C	DERTIFICATION: T	his water wel	I was plugged his record is tru This W	d under my ue to the bes ater Well Re	jurisdiction at of my knowledge was com	and was co edge and be pleted on (n	mpleted on lief. Kansas no/day/year)

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, Geology Section, 1000 SW Jackson St., Ste. 420, Topeka, Kansas 66612-1367. Telephone: 785/296-5522. Send one to Water Well Owner and retain one for your records.