		WATER WELL PLUGGING F	RECORD Form WWC-5	P KSA 82a-1212 ID N	10
1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: H	larna	14 NE14 NE14	17	24	1
		or city street address of well if loc	cated within city?		
		<u> </u>			
2 WATE	R WELL OWNER: Co	igw. Dietz			
	. A -1-1	1 3. ITOO 001	Board of Agricultu	re, Division of Water Resource	ces
T	ate, ZIP Code : Sed	gwick, KS 6713			
1 1	WELL'S LOCATION WITH IN SECTION BOX:		ft. _[
WELL'S STATIC WATER LEVEL ft. 12					
	X	WELL WAS USED AS:	:		
NV	V NE	1 Domestic	5 Public Water Suppl		
		2 Irrigation 3 Feedlot	6 Oil Field Water Sup7 Domestic (Lawn &	Garden) 11 Injection	Well
W		E 4 Industrial	8 Air Conditioning	12 Other	unknown
SW SE Was a chemical / bacteriological sample submitted to Department? Yes					No X
If yes, mo/day/yr sample was submitted					
	S	Water Well Disinfected: Y	es No		
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	casing diameter . 3 in g height above or below land	. Was casing pulled? surface	Yes No in.	lf yes, how mu	ch
6 GROU	T PLUG MATERIAL: 1	Neat cement 2 Cement gro	out 8 Bentonite 4	Other	
	Plug Intervals: From			to ft., From	to ft.
What is	s the nearest source of possi	ble contamination:			
	eptic tank ewer lines	6 Seepage pit7 Pit privy	11 Fuel storage12 Fertilizer storage	16 Other (spe	•
3 W	atertight sewer lines	8 Sewage lagoon	13 Insecticide storag	je	
	ateral lines ess pool	9 Feedyard 10 Livestock pens	14 Abandoned water15 Oil well/Gas well	r well	
Direction from well?					
FROM	то	PLUGGING MATERIALS			
7 CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on					
(mo/day/year) Tune 2 2007 and this record is true to the best of my knowledge and belief Kansas					
Water Well Contractor's License No. This Water Well Record was completed on (mo/day/year) by (signature)					
by (sig	nature)	ang w, Duet			
		all point pen. <u>Please press fir</u> Insas Department of Health a			

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