WATER WELL PLUGGING RECORD Form WWC-5P KSA 82a-1212 - ID NO. 00306609

County: Reno NW 1/4 NW 1/4 SE 1/4 15	24	10 E(V)
Distance and direction from nearest town or city street address of well if located within city?	······	
118 N. Main, Sylvia		
2 WATER WELL OWNER: Sylvia Coop		
RR #, St. Address, Box #: City, State, ZIP Code : Sylvia, KS 67581 Board of Agriculture, Division Application Number:	of Water Resou	rces
3 MARK WELL'S LOCATION WITH 4 DEPTH OF WELL 14 ft.		
AN "X" IN SECTION BOX: WELL'S STATIC WATER LEVEL		
WELL WAS USED AS:		
	9 Dewate	ring
2 Irrigation 6 Oil Field Water Supply	10 Monitor	ing Well
W 3 Feedlot 7 Domestic (Lawn & Garden)   W E 4 Industrial 8 Air Conditioning	11 Injection	n Well
SW SE Was a chemical / bacteriological sample submitted to Department? Yes NoX		
S Water Well Disinfected: Yes NoX		
5 TYPE OF BLANK CASING USED:		
<u>1</u> 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 in. Was casing pulled? Yes NoX. If yes, how much		
6 GROUT PLUG MATERIAL: * 1 Neat cement 2 Cement grout 3 Bentonite 4 Other		
Grout Plug Intervals: From ft. to ft., From ft. to	ft., From	to ft
What is the nearest source of possible contamination:		
1 Septic tank 6 Seepage pit 11 Fuel storage   2 Sewer lines 7 Pit privy 12 Fertilizer storage		becify below)
3 Watertight sewer lines 8 Sewage lagoon 13 Insecticide storage		
4 Lateral lines 9 Feedyard 14 Abandoned water well   5 Cess pool 10 Livestock pens 15 Oil well/Gas well		
Direction from well?		
FROM TO PLUGGING MATERIALS		
*Well completely	/ destroyed	d during
excavation on 1	excavation on 12/12/2005.	
VEW9		
GeoCore #1243	100	
KDHE #A2 078 40	0106	
7 CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on		
(mo/day/year)	best of my know	vledge and belief. Kansas
7   CONTRACTOR'S OF LANDOWNEB'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year)		
by (signature) Only Robel		
INSTRUCTIONS. Use typewriter or ball-point pen. Please press firmly and print clearly. Please fill-in	blanks, ünder	line or circle the correct
answers. Send top three copies to Kansas Department of Health and Environment, Bureau of Wate St., Ste. 420, Topeka, Kansas 66612-1367. Telephone: 785/296-5522. Send one to Water Well Owr	r, Geology Sec	tion, 1000 SW Jackson