	WATER WELL PLUGGING RECO	ORD Form WWC-5P KSA	. 82a-1212 ID NO. ——	
1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Numb
County: Edwards	NW NEW NEW	33	245	19W
Distance and direction from nearest town o	r city street address of well if lo		-	$-i\omega$
Junction Huy	183 + 66	Kinsley		
2 WATER WELL OWNER: West	ern Resources	<i>y</i>		
Tit I II, Oil Address, DON II.	Bon 889 ha Kansas 466		Division of Water Resources	
3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4 DEPTH OF WELL			
N	WELL'S STATIC WATER	LEVEL		
N W N E	WELL WAS USED AS:			
	1 Domestic 2 Irrigation 3 Feedlot	<ul><li>5 Public Water Supply</li><li>6 Oil Field Water Sup</li><li>7 Domestic (Lawn &amp;</li></ul>	ply  Monitorii	ng Well
W E	4 Industrial	8 Air Conditioning		••••••••••••••••••••••••••••••••••••••
s w — s E —	Was a chemical / bacterio If yes, mo/day/yr sample			No X
s	Water Well Disinfected: Ye	es No		
5 TYPE OF BLANK CASING USED:	· · · · · · · · · · · · · · · · · · ·			
<u> </u>	estos-Cement 8 Concrete	Tile	······································	
Blank casing diameterin. Casing height above or below land st	ırface <u>+ 32.4</u> in.		in yes, now inder	· ·····
i	t cement 2 Cement grout	3 Bentonite 4 Oth	er	••••••
Grout Plug Intervals: From		From ft. to	ft., From	to
What is the nearest source of possible			a	
1 Septic tank 2 Sewer lines	6 Seepage pit 7 Pit privy	<ul><li>11 Fuel storage</li><li>12 Fertilizer storage</li></ul>	(6) Other (specif	y below)
3 Watertight sewer lines	8 Sewage lagoon	13 Insecticide storage	•	
4 Lateral lines 5 Cess Pool	9 Feedyard 10 Livestock pens	<ul><li>14 Abandoned water w</li><li>15 Oil well/Gas well</li></ul>	reli	
Direction from well?	How many fe	et? 350	****	
FROM TO PLUGG	ING MATERIALS	7		
0 01/2	i I	_		
0 10 8" Be	intonite	-		
10 15 2" B	entorite			
		_		
				:
MC	213			• •
CONTRACTOR'S OR LANDOWNER' on (mo/day/year)	Ö	and this record is true to the	ne hest of my knowledge a	nd helief Kansas
Water Well Contractor's License No	S-7 siness name of	This Wate	r Well Record was complete	d on (mo/day/year)
by (signature)				
			· · · · · · · · · · · · · · · · · · ·	airele the correct
NSTRUCTIONS: Use typewriter or ball ponswers. Send top three copies to Kans	as Department of Health ar	and <u>print</u> cleany. Please t nd Environment, Bureau	of Water, Topeka, Kans	as 66620-0001.

Telephone: 785/296-3565. Send one to Water Well Owner and retain one for your records.