Distance and direction from nearest town or city street address of well if located within city?    Alary heast Corner of 97H + Highway 50		WATER WELL PLUGGING RECO	ORD Form WWC-5P KSA	A 82a-1212 ID NO. ——	
Distinct and direction from nearrest town or city street address of well fill located within dry?   Albuhuss Connected of 97th + Highway 50	1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Numbe
All wheast forces of 97th Highway 50 2 WATER WELLOWRER Kins by Ready Mik Inc.  RR s, St. Address, Box a, RR1, Box 45 Oky, Silea, JP Code Kins by Anna S  MARK WELLIS LOCATION WITH AN X' IN SECTION WITH AN X' IN SECTION WITH AN X' IN SECTION WATER LEVEL ID. Let. n.  WELL WAS USED As:  "WELL WAS USED As:  "WELL WAS USED As:  "WELL WAS USED As:  "WELL WAS USED As:  "I planned to be a field water Supply 2 indication well 1 industrial 8 Air Conditioning Well 2 Other Was a chemical / bacteriological sample was submitted to Department?Yes	County: Edwards	NW ME "SW"	-33	T 248	R 19 (e)
SW SE WOULD STATION WITH AN "X" IN SECTION BOX  WELL WAS USED AS:  I Domestic S Public Water Supply (3 Monitoring Well 2 Irrigation 6 Oil Field Water Supply (4 Monitoring Well 7 Domestic (Lawn & Carden) 17 Injection Well 2 Irrigation 6 Oil Field Water Supply (4 Monitoring Well 7 Domestic (Lawn & Carden) 17 Injection Well 12 Other Well Water Well Disinfected: Yes No. Water Well Di	Mortheast corner of  water Wellowner: Kinsky	Ready Mix, Inc.			
Second Price   Seco	RR #, St. Address, Box #: RR I, Bo City, State, ZIP Code : Kins Ly	x 45 Kansas		Division of Water Resources	3
WELL WAS USED AS:  1 Domestic 5 Public Water Supply 6 Monitoring Weil 1 Potential 1 Public Water Supply 7 Public Water Supply 8 Dewatering 8 Public Water Supply 8 Dewatering 9 Public Water Supply 8 Public Water Supply 1 Public Water Supply 9 Public Water Topeka Kansas 66820-0001.	3 MARK WELL'S LOCATION WITH	4 DEPTH OF WELL			
1 Domestic   5 Public Water Supply   6 Downstering   7 Domestic   1 Domestic   2 Domestic   1 Domestic   2	N	WELL'S STATIC WATER	LEVEL .I.L./aLR.J ft.		
2 Irrigation 3 Feedot 7 Domestic (Lewn & Garden) 1 Injection Well 3 Feedot 7 Domestic (Lewn & Garden) 1 Injection Well 4 Industrial 8 Alf Conditioning 1 Injection Well 1 Injection Well 4 Industrial 8 Alf Conditioning 1 Injection Well 2 Injectio	N. N. N. E.				
If yes, mol/daylyr sample was submitted		2 Irrigation 3 Feedlot	6 Oil Field Water Sup 7 Domestic (Lawn &	ply (0) Monitori Garden) 11 Injection	ing Well n Well
TYPE OF BLANK CASING USED:    Steel 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (Specify below)	s ws E	Was a chemical / bacterio	logical sample submitted was submitted	to Department?Yes	No
Steel 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (Specify below)  3 PVC 4 ABS 6 Asbestos-Cernent 8 Concrete Tile  Blank casing diameter	S	Water Well Disinfected: Ye	9s No		
Blank casing diameterin	5 TYPE OF BLANK CASING USED:				- <del> </del>
GROUT PLUG MATERIAL:  1 Neat cement 2 Cement grout 3 Bentonite 4 Other .N.A. IL. IL. SOL.  Grout Plug Intervals: From	2)PVC 4 ABS 6 A	sbestos-Cement 8 Concrete	Tile		
Grout Plug Intervals:   From	Blank casing diameterin. Casing height above or below land	Was casing pulled? surfacein.		If yes, how muc	h
What is the nearest source of possible contamination:  1  Septic tank 6  Seepage pit 7  Pit privy 2  Sewer lines 7  Pit privy 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?					
1 Septic tank 5 Sepage pit 7 Pit privy 12 Fertilizer storage 16 Other (specify below) 2 Sewer lines 7 Pit privy 12 Fertilizer storage 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?	_		_		
3 Watertight sewer lines 8 Sewage lagoon 9 Feedyard 14 Abandoned water well 5 Cess Pool 10 Livestock pens 15 Oil well/Gas well  Direction from well?				16 Other (spec	ify below)
4 Lateral lines 5 Cess Pool 10 Livestock pens 14 Abandoned water well 5 Oil well/Gas well  Direction from well?					***************************************
Direction from well? East How many feet?	4 Lateral lines	9 Feedyard	14 Abandoned water v		
CONTRACTOR'S OB LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year)		•			
CONTRACTOR'S OB LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year)					
CONTRACTOR'S OB LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year)	1 Na tive	Sail	-		
CONTRACTOR'S OB LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year)	1 15 Renton	t (8")			
CONTRACTOR'S OB LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year)		to (2")			
CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year)					
CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year)		and the second s			
CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year)					٠.
on (mo/day/year)		7.100			
by (signature)	on (mo/day/year)	R'S CERTIFICATION: This w	vater well was plugged u and this record is true to t	inder my jurisdiction an the best of my knowledge	d was completed and belief. Kansas
by (signature)	Water Well Contractor's License No5	27	This Water	er Well Record was complet	ed on (mo/day/year)
NSTRUCTIONS: 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 inswers. Send top three copies to Kansas Department of Health and Environment, Bureau of Water, Topeka, Kansas 66620-0001.	by (signature)	business name of		.u.s.a.s.	
	NSTRUCTIONS: Use typewriter or bal Inswers. Send top three copies to Ka	I point pen. <u>Please press firmly</u> nsas Department of Health a	and <u>print</u> clearly. Please nd Environment, Bureau	fill in blanks, underline o	r circle the correct