			PLUGGING	RECORD		FORM WWC-5P	KSA 82a-1212	
1 LOCATIO	N OF WATER W	ELL: F	raction			Section Number	Township Number	Range Number
County: F	innev		NE 1/4	NE 1/4	NW 1/4	22	24	32 w
		n nooroot				cated within city?		02 11
2 WATER V RR#, St. Ad City, State,	VELL OWNER: ddress, Box# ZIP Code :	Garden 4100 Ea Garden	City K.O ast Highw City, KS	.A. ay 50	MW-7	Board	l of Agriculture, Division	of Water Resources
3 MARK W	ELL'S LOCATON CTION BOX:	WITH AN	4	OF WELL		29 ft.		
N	N X	E	WELL'S	S STATIC WAT WAS USED AS Domestic Inrigation Feedlot Industrial	ER LEVEL 5 Publ 6 Oil F 7 Law			g Well
s	W SE		If yes, mo/d	nical/bacterioloo ay/yr sample w Disinfected:	as submitted		t? Yes	
5 TYPE OF	BLANK CASING	USED:	1					The second secon
2 PVC Blank cas	4 AB	2 in	. Was cas	stos-Cement ing pulled? Y	8 Concrete 7		specify below)	
6 GROUT	PLUG MATERIAI	L: 1 Nea	t cement	2 Cement grou	t 3 Be	ntonite 4 Oth	er	
What is t	the nearest source	e of possib	ele contamina	tion:	11 Fuels	storage	ft. From	pelow)
			· · ·			zer storage None		
•			3 0			ticide storage		
			Feedyard 14 Abandoned wa					
5 Ces	s Pool	10	Livestock po	ens	15 Oil we	ell/ Gas well		
Direction from	m well?				How many	feet?		
FROM	TO COD			PLUGGING	MATERIALS			
29	3	Bent	onite					
3	3 0 Cement							
7 CONT	RACTOR'S OR	LANDOW	NER'S CER	TIFICATION: 1	This water we	l was plugged under	my jurisdiction and was o	completed
	no/day/yr)						best of my knowledge	
	r Well Contracto		se No.		54	This Water Well	Record was completed	d on (mo/day/yr)
by (
						y 4 1000/		
Enviro	RUCTIONS: Ple inment, Bureau one for your re	ı of Wate	ı blanks an r, Topeka,	d circle the c Kansas 6662	orrect answe 0-0001. Te	ers. Send thre co ephone: 785-296-	pies to Kansas Depart 3565. Send one to Wa	ment of Health and ater Well Owner and