			WATER WELL PLUGGING R	ECORD Form WWC-5P	KSA 82a-1212 ID N	10
1 LOCA	TION OF WATER W	ELL:	Fraction	Section Number	Township Number	Range Number
County: Finney			NW 14 NW 14 SE 14	18	24	32 EW
1			ity street address of well if loc	ated within city?		
403 N.	7th, Garder	n City				
2 WATE	R WELL OWNER:	KDHE	OTT Tables of Or			
	st. Address, Box #: ate, ZIP Code :	Topek	SW Jackson St., Su a, KS 66612	Application Number	e, Division of Water Resour r:	ces
3 MARK WELL'S LOCATION WITH 4 DEPTH OF WELL 42 ft.						
AN "X" IN SECTION BOX: WELL'S STATIC WATER LEVEL n/a ft.						
			WELL WAS USED AS:			
NV	V NE	:	1 Domestic	5 Public Water Supply 6 Oil Field Water Supp		
w		Е	2 Irrigation 3 Feedlot	7 Domestic (Lawn & G	arden) 11 Injection	Well
VV	X		4 Industrial	8 Air Conditioning		
SW SE Was a chemical / bacteriological sample submitted to Department? Yes						NoX
			Water Well Disinfected: Ye			
	S		Water Well Distributed.			
5 TYPE	OF BLANK CASING	S USED:			•	
1 Ste 2 PV	el 3 RMP (SR C 4 ABS		ought 7 Fibergl pestos-Cement 8 Concre		pelow)	
Blank	casing diameter	.2 in.	Was casing pulled?		If yes, how m	uch42.
			rface		Other	
0	IT PLUG MATERIAL Plug Intervals:		eat cement 2 Cement gro 		Otherft., From	to ft
What i	s the nearest source	of possible	contamination:			
1 Septic tank 6 Seepage pit 11 Fuel storage 16 Other (specify below) 2 Sewer lines 7 Pit privy 12 Fertilizer storage						
3 V	Vatertight sewer line	s	8 Sewage lagoon	13 Insecticide storage	•	
	ateral lines Cess pool		9 Feedyard 10 Livestock pens	14 Abandoned water15 Oil well/Gas well	well	
Direction from well? How many feet?						
FROM	то	PI	UGGING MATERIALS			
0		ement g				
0.5	42 B	entonit	e (2")	MW-3S		
				GeoCore #	# 1217	
CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year)3/10/2005						
Water	Well Contractor's Lice	ense No	527	This W	ater Well Record was con	npleted on (mo/day/year)
by (sig	nature)£	welcomp	2 Julius name of			
INSTRUCT	IONS: Use typewi	riter or ball	point pen. Please press fil	mly and print clearly. Plea	ase fill in blanks, underli	ne or circle the correct
answers. So	end top three cop	ies to Kans	sas Department of Health a	and Environment, Bureau	of Water, Geology Sect	ion, 1000 SW Jackson