					WATER WELL PLUGGING R	ECORD	Form WWC-5P	KSA 82a-1	212 ID N	O	
1	1 LOCATION OF WATER WELL:				Fraction	Section	Number	Township	Number	Range Number	
Co	unty: Fi:	nney		,	NW 14 NW 14 NE 14	8		2	4	32 <b>M</b>	
Distance and direction from nearest town or city street address of well if located within city?											
2505 Fleming, Garden City, KS											
2	WATER WELLOWNER: Coastal Mart, Inc. 9749										
	RR #, St. Address, Box #: Colorado Spring, CO 80903 Board of Agriculture, Division of Water Resources Application Number:										
3			ATION WITH		4 DEPTH OF WELL	79.5	ft.				
	AN "X" IN SECTION BOX:				WELL'S STATIC WATER LEVELD.r.y ft.						
	X				WELL WAS USED AS:						
	NW	NW NE E			1 Domestic 5 Public Water Supply 9 Dewatering 2 Irrigation 6 Oil Field Water Supply 10 Monitoring Well 3 Feedlot 7 Domestic (Lawn & Garden) 11 Injection Well 4 Industrial 8 Air Conditioning 12 Other						
w											
					Was a chemical / bacteriological sample submitted to Department? Yes						
r					Water Well Disinfected: Yes No .X						
		S Valid Voll Distribution 100									
5	TYPE OF BLANK CASING USED:										
	1 Stee 2 PVC				ught 7 Fibergla estos-Cement 8 Concre		Other (Specify b				
	Blank o	casing diamet height above	ter2 ine or below land	ı. İ suı	Was casing pulled?	Yes	No	X If	yes, how mu	ch	
6	GROU <sup>-</sup>	GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout Bentonite 4 Other									
	Grout Plug Intervals: From										
	What is	the nearest	source of poss	ible	contamination:						
Septic tank     Sewer lines					<ul><li>6 Seepage pit</li><li>7 Pit privy</li></ul>		11 Fuel storage 12 Fertilizer storage			cify below)	
	3 Watertight sewer lines				8 Sewage lagoon	13 Insecticide storage			•••••	•••••	
	4 Lateral lines 5 Cess pool			9 Feedyard 10 Livestock pens		oandoned water v il well/Gas well	well				
		-	West		•		3.5.1				
	Directi	on nom wen:					d	•••••			
	FROM TO PL		PLl	IGGING MATERIALS							
	79.5 1 Bentoni		it	e							
1		0	0 Cement		rout		MW-4				
						$\overline{}$					
_											
7	CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year)										
Water Well Contractor's License No											
		nature)		the	business name ofb						
IN			juour	all	point pen. <u>Please press fir</u> i						
					as Department of Health a						

St., Ste. 420, Topeka, Kansas 66612-1367. Telephone: 785/296-5522. Send one to Water Well Owner and retain one for your records.