		WATER WELL PLUGGING R	ECORD Form WWC-5P	KSA 82a-1212 ID	NO00075998	
1	LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number	
Co	unty: Finney	SW14 SW 14 SW 14	16	24	32 E/W	
Distance and direction from nearest town or city street address of well if located within city?						
Highway 50 & Campus Drive, Garden City						
2	2 WATER WELL OWNER: COUNTRY CORNER					
	RR #, St. Address, Box #: HIGHWAY 50 & CAMPUS DRIVE City, State, ZIP Code : GARDEN CITY, KS 67846 Board of Agriculture, Division of Water Resources Application Number:					
3	MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4 DEPTH OF WELL				
	WELL'S STATIC WATER LEVEL			R LEVEL Dry ft.		
	NW NE	WELL WAS USED AS: 1 Domestic 5 Public Water Supply 9 Dewatering 2 Irrigation 6 Oil Field Water Supply Monitoring Well 3 Feedlot 7 Domestic (Lawn & Garden) 11 Injection Well				
W		E 4 Industrial	8 Air Conditioning	12 Other		
	SW SE	Was a chemical / bacteriological sample submitted to Department? Yes			No	
	X	esNo	No			
	S					
5						
1 Steel 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (Specify below) ● PVC 4 ABS 6 Asbestos-Cement 8 Concrete Tile						
Blank casing diameter2 in. Was casing pulled? Yes No						
Casing height above or below land surface						
6	GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout Bentonite Other Concrete					
What is the nearest source of possible contamination:						
	1 Septic tank	6 Seepage pit	11 Fuel storage	16 Other (sp	•	
Sewer lines Watertight sewer lines		7 Pit privy 8 Sewage lagoon	12 Fertilizer storage13 Insecticide storage	***************************************	***************************************	
4 Lateral lines 5 Cess pool		9 Feedyard 10 Livestock pens	14 Abandoned water v 15 Oil well/Gas well			
Direction from well? How many feet?						
FROM TO PL		PLUGGING MATERIALS				
0 0.5 Concrete			*Drilled out to	3'		
0.5 3 Bentonite (8"))	MW5			
	3 40 Bentonite (2')	MINA			
			KDHE #U1 02	8 00581 / GeoCore #94	3	
7 CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year)						
	10/31/06 under	the business name of GRACA	re Inc.			
	by (signature)					
INSTRUCTIONS: Use typewriter or ball point pen. Please press firmly and print clearly. Please fill in blanks, underline or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson						
St., Ste. 420, Topeka, Kansas 66612-1367. Telephone: 785/296-5522. Send one to Water Well Owner and retain one for your records.						