			WATER WELL PLUGGING R	ECORD Form WWC-5P	KSA 82a-1212	2 ID NO. No Tag	
1 LOCATION OF WATER WELL:			Fraction	Section Number	Township N	Number Range Number	
County: Finney			SW ₁₄ 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 WATER WELL OWNER: COUNTRY CORNER							
RR #, St. Address, Box #: HIGHWAY 50 & CAMPUS DRIVE Board of Agriculture, Division of Water Resources City, State, ZIP Code : GARDEN CITY, KS 67846 Application Number:							
3 MARK	WELL'S LOC	ATION WITH	4 DEPTH OF WELL				
AN "X" IN SECTION BOX:			WELL'S STATIC WATER LEVELDry ft.				
	N		WELL WAS USED AS: 1 Domestic 5 Public Water Supply 9 Dewatering				
	v	NE					
"i			2 Irrigation 3 Feedlot	6 Oil Field Water Supp 7 Domestic (Lawn & G	oly 🛎	Monitoring Well Injection Well	
W		E	4 Industrial	8 Air Conditioning		Other	
SW SE Was a chemical / bacteriological sample submitted to Department? Yes							
if yes, mo/day/yr sample was submitted							
Water Well Disinfected; Yes No							
5 TYPE OF BLANK CASING USED:							
1 Steel 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (Specify below)							
PVC 4 ABS 6 Asbestos-Cernent 8 Concrete Tile							
Blank casing diameter2 in. Was casing pulled? Yes No							
6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout ● Bentonite ● OtherConcrete							
Grout Plug Intervals: From							
What is the nearest source of possible contamination: 1 Septic tank 6 Seepage pit 11 Fuel storage 16 Other (specify below)							
2 Sewer lines 3 Watertight sewer lines			7 Pit privy 8 Sewage lagoon	12 Fertilizer storage			
4 Lateral lines			9 Feedyard	14 Abandoned water			
5 Cess pool 10 Livestock pens 15 Oil well/Gas well							
Direction from well?							
FROM TO PL			UGGING MATERIALS				
0	0 0.5 Concrete			*Drilled out to	3'		
0.5	3	Bentonite (8")		MW8			
3	40	Bentonite (2")		IVIVVO			
				KDHE #U1 02	28 00581 / GeoCo	ore #943	
7 CONT	RACTOR'S	OF LANDOWNE	ER'S CERTIFICATION: This	water well was plugged	l under my juris	diction and was completed on	
(mo/day/year)							
by (sig	10/31/06 (nature)	undernth	e business name of ΩθΩΩΩ.	e.inc,			
	by (signature)						
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.							