							T11	F15
	٠,	WATER WELL PLUGGING RE	CORD Form WWC-5P	KS	A 82a-12	12 ID N	o <i> _<del> </del> </i>	5-05
1	LOCATION OF WATER WELL:	Fraction	Section Number	Tow	nship	Number	Range	Number
لــــا Cou	unty: Rana	NWM NE 14 NW 1/4	32	T	24	5	R R	<b>₽⊘</b>
	tance and direction from nearest town or		ted within city?				11_0	
	17000							
2	WATER WELL OWNER: City	of Arlinaton						
	RR #, St. Address, Box #: /// L. A. City, State, ZIP Code : Ar//09	Nain 1060x377 4 ton. Ks.67574	Board of Agriculture Application Number		on of Wa	ater Resourc	es	
3	MARK WELL'S LOCATION WITH	4 DEPTH OF WELL	<i>1</i> <b>—</b>					
	AN "X" IN SECTION BOX:	WELL'S STATIC WATER	R LEVEL	1.85				
	×	WELL WAS USED AS:						
	NE NE	1 Domestic	5 Public Water Supply			9_Dewater	ing	
		2 Irrigation 3 Feedlot	6 Oil Field Water Supp 7 Domestic (Lawn & G		_	0 Monitoring	ng Well	
w	E	4 Industrial	8 Air Conditioning	iarueri)		12 Other		
		Was a chemical / hacteriolog	rical sample submitted to De	nartma	ant? Vac		No.	
	SW SE Was a chemical / bacteriological sample submitted to Department? Yes							
		Water Well Disinfected: Ye	s No					
	S							
5	TYPE OF BLANK CASING USED:							
		rought 7 Fibergla bestos-Cement 8 Concret						,
	Blank casing diameter	Was casing pulled? urfacei	Yes No	V	lf y	res, how mu	ich CUT	off.
6	GROUT PLUG MATERIAL: 1 N	leat cement 2 Cement grou			•		deplua	ł
	Grout Plug Intervals: From	ft. to ft.,	Fromft. to	0	ft.,	From	t	o <b>.</b> ft
	What is the nearest source of possible	e contamination:						
<ul><li>1 Septic tank</li><li>2 Sewer lines</li><li>3 Watertight sewer lines</li></ul>		<ul><li>6 Seepage pit</li><li>7 Pit privy</li></ul>	11 Fuel storage 12 Fertilizer storage			Other (spe	ecify below)	
		8 Sewage lagoon	13 Insecticide storage		•••			
	4 Lateral lines 5 Cess pool	9 Feedyard 10 Livestock pens	14 Abandoned water v 15 Oil well/Gas well	well				
	Direction from well?	•	feet?		1	bne 1	known	
	Direction non well:	Tiow many	100t:	•••••				
	FROM TO PI	UGGING MATERIALS						
_ 4	18 O Bento	rte Aleslus						
		7.5						
		•						

INSTRUCTIONS: Use typewriter or ball point pen. <u>Please press firmly</u> and <u>print</u> 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.

