					WATER WELL PLUGGING RECORD Form WWC-5P KSA 82a-1212 ID NO						
1	1 LOCATION OF WATER WELL:				Fraction	Section Number	Township	Township Number		Range Number	
Coi	unty:	Kearn	L	ľ	rul SE14 SE14	9	2	5	35	E E	
	tance and o	direction from	nearest town	or city	street address of well if loca	-					
£	rom 1	lakin.	Imile	Sou	th, 5/2 mile.	s cast, then	13/4 mi	15 50 u	46		
2					Koehn	·					
		. Address, Bo te, ZIP Code	x #: RF		ield, Ks. 678	Board of Agricultu Application Number		/ater Resourc	es		
3	MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:			Ī	DEPTH OF WELL WELL'S STATIC WATER	/40 ft.					
	N										
w					WELL WAS USED AS:						
	NW	NW NE E		E	Domestic 2 Irrigation 3 Feedlot 4 Industrial	5 Public Water Supply 9 Dewatering 6 Oil Field Water Supply 10 Monitoring Well 7 Domestic (Lawn & Garden) 11 Injection Well 8 Air Conditioning 12 Other					
	 sw 				Was a chemical / bacteriological sample submitted to Department? Yes						
		S] '	Water Well Disinfected: Ye	s No					
5	TYPE (OF BLANK CA	ASING USED:	L							
-	2 PVC		` '	Wroug Asbes	ght 7 Fibergla stos-Cement 8 Concret	, ,	below)				
			e or <u>below</u> land		Was casing pulled?		If	yes, how muc	ch		
6	GROU"	T PLUG MATI			cement 2 Cement grou		Other				
		Plug Intervals:			5 ft. to 25 ft.,	Fromft.	to ft.	, From	to	ft	
			source of poss	sible co		11 Fuel starage		6 Other (and	nifu balaw)		
Septic tank Sewer lines				6 Seepage pit 7 Pit privy		12 Fertilizer storage			16 Other (specify below) Nothing within 100 54.		
3 Watertight sewer lines4 Lateral lines				8 Sewage lagoon9 Feedyard	13 Insecticide storag	13 Insecticide storage 14 Abandoned water well					
5 Cess pool				10 Livestock pens	15 Oil well/Gas well						
	Directi	on from well?			How many	feet?					
FROM TO PL			PLUG	GING MATERIALS							
		_									
	5	25	Bento	nit	e chips						
25		160	O Compact		d silts						
7	CONT	RACTOR'S	OF LANDOV	VNEB'	'S CERTIFICATION: This		d under mv i	urisdiction a	nd was con	npleted on	
	∫ (mo/da	ıy/year)	8: 2 4:-	o &		and this record is tr	ue to the best	of my knowle	dge and beli	ief. Kansas	
		2-2-0	r's License No	r the b	ousiness time of	ten Water	V.C.I	ar (a on (ma		
	by (sig	ınature)			MAN STATE OF THE S		······································				

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.