		WATER W	ELL PLUGGING RECORD	Form WWC-5P	(SA 82a-1212	54 5	
			<u></u>		1	30-05.006-00-	
	N OF WATER W	ELL:	Fraction	Section Number	Township Number	Range Number - 01/6	
County:	TORD		SW1/4SW1/4SW1/4		265	25W	
Distance a	nd direction 0 50U	from nea	rest town or city street HMAVE, Y	t address of well if	located within city	East side	
2 WATER W	ELL OWNER:		ory Life Felow				
	ddress, Box ce, ZIP Code	#: 700 : Do	S. 14th Ave dge City, Ks 6	Board of Agri Bol Application N	culture, Division of umber:	Water Resources	
	LL'S LOCATIO	N WITH	4 DEPTH OF WELL	15	ft.		
AN "X"	IN SECTION B	SOX:	WELL'S STATIC WATE	ER LEVEL DAY	ft.		
			WELL WAS USED AS:				
N	<u>.</u>	-N E	1)Domestic	5 Public Water Sup	ply 9 Dewateri	ng	
	"		2 Irrigation 3 Feedlot		Supply 10 Monitori	ng Well	
w		-	E 4 Industrial	8 Air Conditioning			
						×	
s	Was a chemical/bacteriological sample submitted to Department? YesNo						
			Water Well Disinfer	ted: (Tes) No			
8	pusou s Rome	ಶ	water wett brannes				
5 TYPE OF	BLANK CASIN	NG USED:					
□ _1 Steel	3 RMP (SR	R) 5 Wro	ught 7 Fiber	glass 9 Other	(specify below)		
⊘ PVC	4 ABS			ete Tile			
Blank o	asing diamet	ter	Min. Was casing land surface	pulled? Yes	No If yes, how	much	
	LUG MATERIAL						
Grout P	olug Interval	ls: Fro	m. Ø ft. to.5ft	., Fromft. t	oft., From	toft.	
What is	the nearest	source o	f possible contamination	n:			
2 Sew (3)Wat	otic tank wer lines certight sewe	er lines	7 Pit privy 8 Sewage lagoon	11 Fuel storage 12 Fertilizer stora 13 Insecticide stor	ge age	pecify below)	
	teral lines ss Pool		9 Feedyard 10 Livestock pens	14 Abandoned water 15 Oil well/Gas wel			
Directi	ion from well	?		How many feet?			
FROM	то	PI	UGGING MATERIALS	\neg			
				- INSD	poted by		
15'	I		nted Sand		•		
5	0	Bent	onite	- Mur	2X ShRi	ui'C	
				11100	ZI JAIN	0176	
					10	1	
					d Coun	ty	
					ANATA		
7 00077	TOD (0. 02. 1	IDOLINES (S	OFFITTION TO THE PARTY OF THE P			· /	
├ on (mo/	/day/year)	510.2	CERTIFICATION:This wate	rd is true to the be	est of my knowledge a	nd belief. Kansas	
Water W	Well Contract	tor's Lice	under the business nam	This Water Well e of A. ICTOP.	Record was complete	d on (mo/day/year)	
by (sig	nature)		under the business name	1.1065)		
INSTRUCTIO	ONS: Use typ	pewriter o	or ball point pen. Plea	se press firmly and	print clearly. Plea	se fill in blanks,	
Bureau of			answers. Send top thr 66620-0001. Telephon				