GSI Job No. 097340 RW-6													
W	ATER WEI	L PLUGGII	NG RECORD	Form WWC-5P	KSA	82a-1212	ID NO.						
1	County:		Ford	Fraction SW 1/4 SW		1/4	tion Number		ship Number 26S	Range Num 25	nber W		
	Distance and direction from nearest town or city street address of well if located within city?  100 Frontview, Dodge City												
2	WATER WELL OWNER: Fas Stop (U-Pump-It)						Global Positioning System (decimal degrees, min. of 4 digits) Latitude:						
	RR#, St. Address, Box #: 301 S. 2 <sup>nd</sup> City, State, ZIP Code: Dodge City, KS 67801					Lor Ele	Longitude: Elevation: Datum:						
								Data Collection Method:					
3		ELL'S LOC "X" IN SEC		4 DEPTH OF				ft.  138	3.56 ft				
				WELL WAS	WELL WAS USED AS:								
	w	NW	NE	2 Irrigatio	1 Domestic 5 Public Water Supply 9 Dewatering 10 Monitoring 3 Feedlot 7 Domestic (Lawn & Garden) 11 Injection Well								
		sw	- SE	4 Industri Was a ch		8 Air Co		ubmitted t	12 Other Re				
_	T/DE 05	s											
5	TYPE OF BLANK CASING USED:  1 Steel 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (Specify below)  2 PVC 4 ABS 6 Asbestos-Cement 8 Concrete Tile												
		ing diamete eight above	r <b>6</b> in. V	Vas casing pulled? urface <b>3</b>	Yes X	No	If yes, how	much <u>3 f</u>	t.				
6	GROUT F	LUG MATE	RIAL: 1 N	eat cement 2	Cement	grout	3 Bentonite	е	4 Other				
	Grout Plu	g Intervals:	From 3	ft. to 147.5	ft., F	rom	ft. to	. ft	., From	to	ft.		
What is the nearest source of possible contamination:  1 Septic tank 6 Seepage pit 11 Fuel Storage 16 Other (specify below)													
2 Sewer lines 7 Pit privy 12 Fertilizer storage 3 Watertight sewer lines 8 Sewage lagoon 13 Insecticide storage													
	4 Lateral lines 9 Feedyard 14 Abandoned water 5 Cess pool 10 Livestock pens 15 Oil well/Gas well												
	FROM 0	TO 3	· · · · · · · · · · · · · · · · · · ·	ING MATERIALS Concrete		FROM	TO	F	PLUGGING MA	TERIALS			
ł	3	147.5		Cement									
Ĺ				<del></del>									
		TOR'S OR (mo/day/ye		S CERTIFICATIO	this rec	ord is true	to the best o	f my knov	vledge and bel	nd was ief. Kansas V	Vater		
	ell Contraction	tor's License	No. 53	1 This Wa	ter Well	Record wa	s completed	on (mo/d	lay/year)11	/13/09 und	ler the		
of	onicos tidii		chnical Service	es, Inc.	y (signa	ture)	Jan	d K	~~				
INS	STRUCTIO	NS: Pleas	e fill in blanks or	circle the correct	answers	Send top	three copies	s to Kans	as Department	of Health and			
En	vironment,	Bureau of \	Nater, Geology	Section, 1000 SW	Jackson	St., Ste. 4	20, Topeka,	Kansas 6	6612-1367. T	elephone:			