	WATER WELL PLUGGING RECORD Form WWC-5P KSA 82a-1212 ID NO			
1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: Hamilton Distance and direction from nearest town or	SW¼ SE¼ NE¼ city street address of well if loca	15 ated within city?	26	42 E/W
2 WATER WELL OWNER: West RR #, St. Address, Box #: City, State, ZIP Code : Syr	teman Farms I Box 46 acuse, KS 618		, Division of Water Resour	ces
3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4 DEPTH OF WELL 3	17.5 ft.	. 10,11,0	
N NE	WELL WAS USED AS:	5 Public Water Supply	9 Dewater	ina
w ====================================	2 Irrigation 3 Feedlot 4 Industrial	6 Oil Field Water Supp 7 Domestic (Lawn & G 8 Air Conditioning	ly 10 Monitori arden) 11 Injection	ng Well
SW SE	If yes, mo/day/yr sample wa	gical sample submitted to De s submitted	partment? Yes	No .X
S	Water Well Disinfected: Ye	s No		
Blank casing diameter	Neat cement 2 Cement ground to	Yes	Other	to ft.
5 Cess pool Direction from well?	10 Livestock pens How many	15 Oil well/Gas well feet?		
FROM TO P	LUGGING MATERIALS			
O 164 Sub so	si l			
16ft. 21ft. Cemen	· †			
21 ft. /72 ft sub so		_		
17291 375H Disinfe	cted sand			
CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year)				
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.