KOLAR Document ID: 1585967

W	ATER WELL PLUGGING R	RECORD	Form WW	/C-5P	KSA 82	a-1212 ID NO.		
1	LOCATION OF WATER WELL:	Fraction		Section		Township Number		
	County: 1/4 1/4 1/4 1/4 Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here If at owner's address, and a strength of the strengeh of the strength of the strength of the				4 T S E W Global Positioning Systems (GPS) information: Latitude:			
2	WATER WELL OWNER: RR#, St. Address, Box #: City, State ZIP Code:							
3 W	MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX: 4 DEPTH OF WELLft. N VELL'S STATIC WATER LEVELft WELL WAS USED AS: Multiple of the state of the st							
5	5 TYPE OF BLANK CASING USED: Steel RMP (SR) Wrought PVC ABS Asbestos-Cement Fiberglass Other (Specify below) Blank casing diameter in. Was casing pulled? Yes No If yes, how much Blank casing height above or below land surface in. If yes, how much If yes, how much							
6	GROUT PLUG MATERIAL: Neat cement Cement grout Bentonite Other							
	FROM TO PLUG	GING MATE	ERIALS	FROM	ТО	PLUGGING	MATERIALS	
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No This Water Well Record was completed on (mo/day/year) under the business name of by (signature)								
Send one white copy to Kansas Department of Health & Environment, Geology Section, 1000 SW Jackson Street, Ste. 420, Topeka, KS 66612-1367. Send one copy to WATER WELL OWNER and retain one for your records. Visit us at <u>http://www.kdheks.gov/waterwell/index.html</u> Telephone 785-296-5524.								