		WATER WELL PLUGGING RE	CORD Form WWC-5P	KSA 82a-1212 ID N	IO
1 LOCATION O	F WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: Kingman		14 SE 14 SE 14 NE	34	27	10 6
1			ed within city?		10
From Cont.	ingham /m	city street address of well if locat The BAST 1/2 No.	ofh 1 BAST	North To W	vell Behand
2 WATER WELI	LOWNER: ELM	en Freund			House
RR #, St. Addre City, State, ZIP	ess, Box #: 1500 o	NW 5 5T.	Board of Agriculture Application Number	, Division of Water Resourc	es
3 MARK WELL'S	S LOCATION WITH	4 DEPTH OF WELL #0 ft.  WELL'S STATIC WATER LEVEL 21 ft.			
	N	WELL'S STATIC WATER	LEVEL ft.		
		WELL WAS USED AS:			
NW	NE —	1 Domestic 2 Irrigation	5 Public Water Supply	9 Dewaterir	
w	X _	3 Feedlot	6 Oil Field Water Supp 7 Domestic (Lawn & G		
VV	E	4 Industrial	8 Air Conditioning	12 Other	
SW ————————————————————————————————————					
Water Well Disinfected: Yes No					
5 TYPE OF BLANK CASING USED:					
1 Steel 2 PVC		ought 7 Fiberglass pestos-Cement 8 Concrete		elow)	
Blank casing of Casing height	diameterin. above or below land su	Was casing pulled?	Yes No /	If yes, how muc	h
6 GROUT PLUG Grout Plug Inte		eat cement 2 Cement grout		ther ft., From	
_	arest source of possible	·		,	
Septic tar		6 Seepage pit	11 Fuel storage	16 Other (spec	ify below)
Sewer lines  3 Watertight sewer lines		7 Pit privy 8 Sewage lagoon	<ul><li>12 Fertilizer storage</li><li>13 Insecticide storage</li></ul>		
4 Lateral lines 5 Cess pool		9 Feedyard	14 Abandoned water w	rell	
	, ,	10 Livestock pens	15 Oil well/Gas well		
Direction from	well?	How many fe	et? <b>Z<i>O</i>O</b>		
FROM TO		UGGING MATERIALS			
40 3	Benta	mite			
3 0	Clay	mite Top Soil			
		•			
			-		
7					
7 CONTRACTO (mo/day/year)	PR'S OF LANDOWNE	R'S CERTIFICATION: This w	vater well was plugged and this record is true	under my jurisdiction an to the best of mv knowled	d was completed on de and belief. Kansas
Water Well Con	tractor's License No	672 Jousiness pane of Craw	This Water	er Well Record was compl	eted on (mo/day/year)
by (signature)					
INSTRUCTIONS: U	Jse typewriter or ball	point pen. Please press firmly	y and <u>print</u> clearly. Pleas	e fill in blanks, underline	or circle the correct
answers. Send top	three copies to Kans	as Department of Health and	Environment, Bureau of	f Water, Geology Section	i, 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.