		W	ATER WELL PLUGGING R	ECORD Form WWC-5F	P KSA 82a-1212 ID I	NO. 144108	
1	LOCATION OF WATER W	/ELL:	Fraction	Section Number	Township Number	Range Number	
 Cour	nty: Pratt	N	N 4 SE 4 NW 4	25	27	// _{EW}	
Dista	ince and direction from near	est town or city	street address of well if loc				
ó	2 mi, W, 2 mi. 1	V. /mi.	W of Cunning	gham			
2 WATER WELL OWNER: Northern Natural Gas Company							
RR #, St. Address, Box #: PO Box 178 City, State, ZIP Code : Cunningham, KS 67035 Board of Agriculture, Division of Water Resources Application Number:							
3	MARK WELL'S LOCATION		DEPTH OF WELL	/3 ft.			
	AN "X" IN SECTION BOX: N WELL'S STATIC WATER LEVEL 6. 5 ft.						
			WELL WAS USED AS:				
w	NW NE	EE	1 Domestic2 Irrigation3 Feedlot4 Industrial	5 Public Water Supply6 Oil Field Water Sup7 Domestic (Lawn & G8 Air Conditioning	oply	ing Well	
SW SE SE Was a chemical / bacteriological sample submitted to Department? Yes						No	
L	Water Well Disinfected: Yes No						
5 TYPE OF BLANK CASING USED:							
1 Steel 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (Specify below)							
	②PVC 4 ABS Blank casing diameter	2 in.	was casing pulled?	Yes No	If yes, how m	uch /3	
6	CPOUT BUILD MATERIAL						
Grout Plug Intervals: From							
	What is the nearest source	e of possible co	ontamination:		_		
1 Septic tank 2 Sewer lines 3 Watertight sewer lines 4 Lateral lines 5 Cess pool			6 Seepage pit 7 Pit privy 8 Sewage lagoon 9 Feedyard 10 Livestock pens	11 Fuel storage 12 Fertilizer storage 13 Insecticide storag 14 Abandoned water 15 Oil well/Gas well	e , well	ecify below)	
Direction from well?							
FF	FROM TO		GING MATERIALS		DECENT	DECENTED	
	0 6 3	entonit	te (8")	mw7		RECEIVED	
		entonit			OCT 2 2 200	04	
					BUREAU OF WATER		
				Geo Core #213			
7	CONTRACTOR'S OF L (mo/day/year)	ANDOWNER' 12004 ense No	S CERTIFICATION: This	s water well was plugged and this record is true. This W	d under my jurisdiction a ue to the best of my knowl ater Well Record was com	and was completed on edge and belief. Kansas apleted on (mo/day/year)	

INSTRUCTIONS: Use typewriter or ball point pen. <u>Please press firmly</u> and <u>print</u> 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.