	WATER WELL PLUGGING RECO	RD Form WWC-5P KSA	82a-1212 ID NO	0068365	
1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number	
County: Pra H	SW 1/4 SE 1/4 SE 1/4	34	27.5	13 W	
Distance and direction from nearest town 1230 E. First	or city street address of well if lo	cated within city?			
2 WATER WELLOWNER: Steve	e Wright	(66,124)			
RR #, St. Address, Box #: /230	E. First St.	Board of Agriculture, Application Number:	Division of Water Resource	s	
3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:	Kansas 6712 4 DEPTH OF WELL	47 ft			
N	WELL'S STATIC WATER	LEVEL ft.			
	WELL WAS USED AS:				
NW NE	1 Domestic	Dewatering			
w	2 Irrigation 3 Feedlot	3 Feedlot 7 Domestic (Lawn & Garden) 11 Injection Well			
	4 Industrial	8 Air Conditioning			
S W ———— S E ———	Was a chemical / bacteriological sample submitted to Department?Yes				
S X	Water Well Disinfected:	/es No			
TYPE OF BLANK CASING USED:					
	Vrought 7 Fibergla	ass 9 Other (Specify	•		
Blank casing diameter2 in	sbestos-Cement 8 Concret Was casing pulled?	e Tile	V Prille	dout to 31	
Casing height above or below land	surface	n. 1es No	If yes, how mi	uch	
	leat cement 2 Cement grou		Other	to 1	
What is the nearest source of pos			, y 10, 110, 11	то тт.	
1 Septic tank 2 Sewer lines	6 Seepage pit 7 Pit privy	11 Fuel storage 12 Fertilizer storage	16 Other (sp	· '	
3 Watertight sewer lines 4 Lateral lines	8 Sewage lagoon	13 Insecticide stora	ige		
5 Cess Pool	9 Feedyard 10 Livestock pens	14 Abandoned wate15 Oil well/Gas well			
Direction from well? WW	How many	feet? 400			
FROM TO PLU	JGGING MATERIALS				
0 3 Neat	cement (8")				
7.5	nite (2")				
	,,			. }	
		mw8			
		111000			
CONTRACTOR'S OR LANDOWN	ER'S CERTIFICATION: This	water well was plugge	d under my jurisdiction	and was completed	
Water Well Contractor's License No	527	and this record is true This V	to the best of my knowled Vater Well Record was com	lge and belief. Kansas pleted on (mo/day/year)	
on (mo/day/year)	business name of(22	ocore inc		, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
INSTRUCTIONS: Use typewriter or b	all point pen. Please press fire	mly and print clearly. Plea	so fill in blanka underlin		
answers. Send top three copies to k Telephone: 785/296-3565. Send one to V	ansas Department of Health	n and Environment Bur	eau of Water, Topeka, h	Kansas 66620-0001.	