MWZ

WATER WELL PLUGGING RECORD

Form WWC-5P

KSA 82a-1212

ID NO.

11	LOCATION OF W	ATER WELL:		Fraction	Section	Number	Township	Number	Range	Number
	0.1	_	٨١	11500	O		0.7		10	
County				Wat 1/4			WT		15	E(W
Distance	ce and direction fro	om nearest town	orsity	street address of well if loo	cated within city	$^{?}$ $^{\prime}$	11 .	. 1	710	. 1.
	49	91/1/	الما	MWan KOD	ומנופאו	N 41	att K	5 11	410	74
	- FU	Dat	n	Aviolity To	y c von	~ / II.	V 11 12		//-	
2	WATER WELL OV		1 19	Muation Long	- •	·				
F	RR #, St. Address,	Box #: Sal	on Sun	rise AND	Board	d of Agriculture	, Division of W	ater Resourc	es	
	City, State, ZIP Cod		1 23	67124		cation Number				
3				DEPTH OF WELL	e0	ft.				
1 1	MARK WELL'S LO AN "X" IN SECTION		Ľ	`						
		ON BOX:	İ	WELL'S STATIC WATE	R LEVEL 2/	7.5 ft.				
	N_		ĺ							
				WELL WAS USED AS	:					
		NE		1 Domestic	5 Public	Water Supply		9 Dewateri	na	
	144	NE		2 Irrigation		ld Water Supp	olv	10 Monitorin		
]			_	3 Feedlot		stic (Lawn & G		11 Injection		
W			E	4 Industrial	8 Air Co	nditioning		12 Other		
									\checkmark	
	SW ————————————————————————————————————									
	If yes, mo/day/yr sample was submitted									
			١,	Water Well Disinfected: Y	es No	X				
	S			vidioi vion bionnooloa.						
TYPE OF BLANK OACHIO HOED										
5 TYPE OF BLANK CASING USED:										
1 Steel 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (Specify below)										
PVC 4 ABS 6 Asbestos-Cement 8 Concrete Tile										
Blank casing diameter in. Was casing pulled? Yes										
				ce		110	Z II	yes, now mu	CI1	
<u> </u>										
GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout Bentonite 4 Other										
Grout Plug Intervals: From										
What is the nearest source of possible contamination:										
					11 Fuel		_	Other (and	د. حام کار	
1 Septic tank 2 Sewer lines				6 Seepage pit 11 Fuel storage 7 Pit privy 12 Fertilizer storage 13 Fuel storage 14 Other (specify below)						2
3 Watertight sewer lines				8 Sewage lagoon 13 Insecticide storage						
4 Lateral lines				9 Feedyard 14 Abandoned water well						
5 Cess pool 10 Livestock pens 15 Oil well/Gas well										
	Direction from we	II 2		How man	, foot?					
	Direction from we	Wf		How many	/ feet?	***************************************				
FROM TO PLUGGING MATERIALS										
	JIVI 10		rLod	GING WATERIALS						
	13	100	1	P-10		_				
ح ⊢	5 30-	26 7	\	81 10	1.0	-				
	5 100	10-30	10	#Oliasbandin	eBense	Zel				
7	CONTRACTOR'S	OF_LANDOW	NER'	S CERTIFICATION: This	s water well	was plugged	under mv iu	risdiction a	nd was cor	mpleted on
CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year)										
Water Well Contractor's License No										
			the b	usiness name of	arko (4	rotte	alpsi	TX		
	by (signature)		کا	T MUUM						
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										
111011	.00110110.036	Type willer of L	an po	un pen <u>i lease press III</u>	riny and billi	cicarry. Fieds	oo iiii iii bialii	vo, underillik		III COIIECL

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.