SVE

WATER WELL PLUGGING RECORD

Form \M\\MC-5D

KSA 82a-1212

ID NO._____

1	LOCATION OF WATER WELL:	Fraction	Section Number	Township	Number	Range	Number	
Cou	inty: Matt	N 6 1/4 6 1/4	9	27		13	E/ (V	
Distance and direction from nearest town or city exceet address of well if located within city?								
2 WATER WELL OWNER: Pratt Ag Aviation, Inc.								
	RR #, St. Address, Box #: 581 Sunrise Are Board of Agriculture, Division of Water Resources City, State, ZIP Code : Pra # KS (67124 Application Number:							
3	MARK WELL'S LOCATION WITH	4 DEPTH OF WELL 5.5 ft.						
	AN "X" IN SECTION BOX:	WELL'S STATIC WATER LEVEL 1993 ft.						
		WELL WAS USED AS:						
	NW NE	1 Domestic 2 Irrigation	5 Public Water Supply6 Oil Field Water Supp	lv	9 Dewaterir 10 Monitorin	•		
w	Е	3 Feedlot 4 Industrial	7 Domestic (Lawn & G	arden)	11 Injection	Well Voy Amer	Krtatta	
			8 Air Conditioning					
SW Sw Was a chemical / bacteriological sample submitted to Department? Yes						10		
	S	Water Well Disinfected: Ye	es No					
5	TYPE OF BLANK CACING LICED.							
1 Steel 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (Specify below)								
2 PVC 4 ABS 6 Asbestos-Cement 8 Concrete Tile Blank casing diameter								
Casing height above or below and surface in. 6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 4 Other								
GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout Bentonite 4 Other								
What is the nearest source of possible contamination:								
1 Septic tank2 Sewer lines		6 Seepage pit 11 Fuel storage 16 Other specify 7 Pit privy 12 Fertilizer storage		ify below)	P			
3 Watertight sewer lines		8 Sewage lagoon	13 Insecticide storage	13 Insecticide storage				
4 Lateral lines5 Cess pool		9 Feedyard10 Livestock pens	14 Abandoned water v 15 Oil well/Gas well	14 Abandoned water well15 Oil well/Gas well				
Direction from well? How many feet?								
FROM TO PLU		UGGING MATERIALS						
	0 3 conc	2676 -						
٠	7 55 20-308	Sold-Bentonik B	enseal					
د			•					
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. ———————————————————————————————————								
	by (signature)	ousipess name of	M. W. S. HOU. T.		J .15.4			
	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.