WATER WELL PLUGG	ING RECORD Form W	VC-5P	KSA 82	a-1212 ID NO.		
1 LOCATION OF WATER W. County: Kiowa	ELL: Fraction 1/4 NE 1/4 NE 1/4 NE	Section 1/4	Number 15	Township Number T 27 S	Range Number	
direction from nearest town or intersection: If at owner's address, check here			Global Positioning Systems (GPS) information: Latitude:(in decimal degrees) Longitude:(in decimal degrees) Elevation:			
1 3/4E, 5 1/2N of Brenham, KS			Datum: WGS84, NAD83, NAD27 Collection Method:			
2 WATER WELL OWNER: Steven Thompson RR#, St. Address, Box #: RR1 Box 90 City, State ZIP Code: Haviland, KS 67059			GPS unit (Make/Model:			
3 MARK WELL'S LOCATION 4 DEPTH OF WELL 97 ft.						
WITH AN "X" IN SECTION BOX: WELL'S STATIC WATER LEVEL 35						
N ,	WELL WAS USED AS:					
W NE NE Domestic Irrigation Feedlot Industrial Var Conditioning Under Supply Domestic (Lawn & Garden) Injection Well Other Was a chemical/bacteriological sample submitted to Department? Yes No						
5 TYPE OF BLANK CASING USED:						
Steel RMP (SR) Wrought Fiberglass Other (Specify below) Asbestos-Cement Concrete Tile						
Blank casing diameter 5 in. Was casing pulled? Yes No If yes, how much Casing height above or below land surface 3 ft. below in.						
6 GROUT PLUG MATERIAL: Neat cement Cement grout Bentonite Other						
Grout Plug Intervals: From 3 ft. to 35 ft., From ft. to ft., From ft., From ft.						
What is the nearest source of possible contamination: Septic tank Seepage pit Fuel Storage Other (specify below) Fertilizer storage						
Watertight sewer lines						
FROM TO	PLUGGING MATERIALS	FROM	ТО	PLUGGING	MATERIALS	
97 35 grav				Thompson A 1-15		
3 0 top s	0 top soil			Sterling Drilling Company		
				PO Box 1006 Pratt, KS 67124		
				Pratt, NS 67 124		
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 12/28/10 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 186 . This Water Well Record was completed on (mo/day/year) 01/07/11 under the business name of Kelly's Water Well Service, Inc. by (signature)						
INSTRUCTIONS: Use typewriter or ballpoint pen. Please press firmly and print 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: 785/296-5524. Send one to Water Well Owner and retain one for your records. Visit us at http://www.kdheks.gov/waterwell/index.html.						
Check one: White Copy Blue Copy Pink Copy						