	54 12692 ATER WE		G (Old)	FCORD	Form WW	/C-5P	KSA 82	a-1212 ID NO.		
	COCATION	OF WATE	R WELL:	Fraction		Section	Number	Township Number	Range Number	
County: Kiowa 1/4 1/4 NC 1/4 SW1/4 18 T 27 S 19 E V Street/Rural Address of Well Location; if unknown, distance & Global Positioning Systems (GPS) information:										
	direction from			ion: If at own		Latitude: 37.693498 (in decimal degrees) Longitude: -99.445237 (in decimal degrees)				
۸۵	check here proximately 6	 S miles nort	h and 8 mile	e west of Gr	eenshura	Elevation:	Unkno	wn		
_						Datum: WGS84, NAD83, NAD27 Collection Method:				
2	WATER WELL OWNER: Roger Stotts RR#, St. Address, Box #: 22259 Hwy 183						☐ ☐ GPS unit (Make/Model: WAAS			
	City, State ZIP Code: Greensburg, KS 67054					Digital Map/Photo, \square Topographic Map, \square Land Survey Est. Accuracy: $\square < 3 \text{ m}$, $\square 3-5 \text{ m}$, $\square 5-15 \text{ m}$, $\square > 15 \text{ m}$				
_										
3	WITH AN "Y" IN SECTION									
	BOX: WELL'S STATIC WATER LEVEL 57.80 ft									
	WELL WAS USED AS: Domestic Public Water Supply Dewatering									
☐ Oil Field Water						d Water Su	Supply Monitoring			
ŀ	W	V CE	E	☐ Fee		☐ Domesti			ion Well	
	1 1 1 1									
	S									
5	TYPE OF BLANK CASING USED:									
	Blank casing diameter 16 in. Was casing pulled? Yes No No If yes, how much									
	Casing height above or below land surface. 48 in.									
6	GROUT PLUG MATERIAL: Neat cement Cement grout Bentonite Other									
"										
	What is the nearest source of possible contamination: Septic tank Septic tank Discrepance pit Fuel Storage Other (specify below)									
	Sewer lines Pit privy Fertilizer storage None Known									
	□ Watertight sewer lines □ Sewage lagoon □ Insecticide storage □ Lateral lines □ Feedyard □ Abandoned water well Direction from well?									
	Cess pool									
	FROM	ТО		GGING MAT	ERIALS	FROM	ТО	PLUGGING	MATERIALS	
	0 4	<u>4</u> 54	Topsoil Bentonite	Chips						
	54	88.60	Chlorinat							
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 12/12/13 and this record is true to the best of my knowledge and belief. Kansas Water										
Well Contractor's License No. 185 . This Water Well Record was completed on (mo/day/year) 12/13/13 under the										
\vdash	siness name o			<u> </u>				1 43 V		
IN	STRUCTIO	NS: Use typ	pewriter or b	allpoint pen. o Kansas De	Please press fir	mly and pri	nt clearly. ironment	Please fill in blanks, u Bureau of Water. Geol	Inderline or circle the logy Section, 1000 SW	
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										
rec	records. Visit us at http://www.kdheks.gov/waterwell/l~ndex.html.									