W	WATER WELL PLUGGING RECORD Form WWC-5P KSA 82a-1212 ID NO.				
1		Fraction	Section Number	Township Number Range Number	
	County: FORd	SE'W WOW WANN		T 27 S R 25 DE XIW	
	Street/Rural Address of Well Location;		Global Positioning Systems (GPS) information: Latitude: N 37. (87525 (in decimal degrees)		
		direction from nearest town or intersection: If at owner's address, check here Primrose 12 South on 109 Rd.		Longitude: W 100-041351 (in decimal degrees) Elevation: 2582	
	Check mare Primrose 12				
			Datum: X WGS84, NAD83, NAD27 Collection Method: GPS unit (Make/Model:		
_	Day	ice Hamilton			
2	RR#, St. Address, Box #: 243,02 DD Rd		Digital Map/Photo, Topographic Map, Land Survey		
	City, State 211 Code. ENS	19N KS 67841	Est. Accuracy: L <	3 m, 3-5 m, 5-15 m, > 15 m	
3	MARK WELL'S LOCATION 4 DEPTH OF WELL 138 ft.				
	WITH AN "X" IN SECTION BOX: WELL'S STATIC WATER LEVEL O A				
	WELL WAS USED AS:				
	NW NE Domestic Public Water Supply Dewatering				
١,	W Control Co				
'	Industrial Air Conditioning Other				
	- SW - SE -				
	Was a chemical/bacteriological sample submitted to Department? Yes No				
4	5 TYPE OF BLANK CASING USED:				
	X Steel RMP (SR) Wrought Fiberglass Other (Specify below)				
	PVC Asbestos-Cement Concrete Tile				
	Blank casing diameter 16 in. Was casing pulled? Yes No K If yes, how much				
	Casing height above or below land surface 48 in.				
_					
6	6 GROUT PLUG MATERIAL: Next cement Cement grout Bentonite Other				
	Grout Plug Intervals: From <u>0</u> ft. to <u>5</u> ft., From <u>133</u> ft. to <u>138</u> ft., From ft. to ft.				
	What is the nearest source of possible contamination:				
	Septic tank Seepage pit Fuel storage Other (specify below)				
	Sewer lines Pit privy Fertilizer storage				
	Watertight sewer lines Sewage lagoon Insecticide storage Lateral lines Feedyard Abandoned water well Direction from well?				
	Cess pool Livestock pens Oil well/Gas well How many feet? 2,000				
		IGGING MATERIALS	FROM TO	PLUGGING MATERIALS	
	0 5 Bento				
		n fill sand			
"-	133 138 Bento	nite			
			·· ··		
1_					
	7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 3-4-16 and this record is true to the best of my knowledge and belief. Kansas Water				
W	'ell Contractor's License No. 8+0			on (mo/day/year) 03 78-16 under the	
	business name of Nash Water Well Service, LLC by (signature) Julian				
1=	DISTRICTIONS, II-demonstrate and allocate and Discourse for the desired and Discourse for the Di				
	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.				