WA	TER WELL PLUGGING RI	ECORD Form WWC	-5P KSA 82a-1	212 ID NO.		
1	LOCATION OF WATER WELL: County: + 456e	Fraction 5 1/4 5 W 1/4 W W/	Section Number	Township Number 27	Range Number E/W	
	Distance and direction from nearest to	own or city street address of w	ell if located within city			
6 Miles East of 14 Miles North of Sublette						
2	WATER WELL OWNER: Orle	Frank	Global Positioning S			
		WW Road	Longitude:			
	City, State ZIP Code:	land KS 47837	Elevation: Datum:			
	2, 2		Data Collection Metho	od:		
3	MARK WELL'S LOCATION	4 DEPTH OF WELL_	298 ft.		**************************************	
	WITH AN "X" IN SECTION BOX: WELL'S STATIC WATER LEVEL 257 ft					
	N WELL SSTATIC WATER LEVEL 2011					
		WELL WAS USED AS	S:			
	NW NE	1 Domestic	5 Public Water Suppl	y 9 Dewa	terina	
**	×	2 Irrigation	6 Oil Field Water Su	pply 10 Mon		
W	E	3 Feedlot	7 Domestic (Lawn &		tion Well	
	SW SE	4 Industrial	8 Air Conditioning	12 Othe	r	
		Was a chemical/bacteri	iological sample submit	ted to Department? You	esNo	
5	S TYPE OF BLANK CASING USED					
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 in. Was casing pulled? Yes No If yes, how much					
	Casing height above or below land surfacein.					
6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other						
Grout Plug Intervals: From 5 ft. to 10 ft., From ft. to ft., From to ft.						
57 day 1 ag 11.01						
	What is the nearest source of possible contamination:					
	1 Septic tank 6 Seepage pit 11 Fuel Storage 16 Other (specify below) 2 Sewer lines 7 Pit privy 12 Fertilizer storage					
	3 Watertight sewer lines 8 Sawage laggon 13 Insecticida storage					
	4 Lateral lines 9 Feedyard 14 Abandoned water well Direction from well? South west 15 Cess pool 15 Oil well/Gas well How many feet? 2700					
	3 Cess poor	OUR PELIS 13 OII WEII/O	as well flow illa	my reer?	9.0	
		GING MATERIALS	FROM TO	PLUGGING MA	ATERIALS	
	295 165 Chlor	inglyd Squel				
	165 10 Clay	15461011			7,500	
	10 3 Beit	nife				
	S	Ar Caring 7				
	- Pa	CANII				
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7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) and this record is true to the best of my knowledge and belief. Kansas Water						
Well Contractor's License No. 805 This Water Well Record was completed on mo/day/year) 1-9-12 under the						
bus			by (signature)	urd Ems		
INSTRUCTIONS: Use typewriter or ballpoint pen. Please press firmly and print clearly. Please fill in blanks, underline or circle the						
con	ect answers. Send top three copies to	Kansas Department of Health	and Environment, Bure	eau 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. Visit us at http://www.kdheks.gov/geo/waterwells.						