WATER WELL PLUGGING RE	ECORD Form WWC	C-5P KSA 82a-12	12 ID NO	ESPRIMENTAL PROPERTY OF THE PR
1 LOCATION OF WATER WELL: County:	Fraction VE 1/4 VW/4 VW	Section Number	Township Number	Range Number
County: County: Distance and direction from nearest to	own or city street address of v	vell if located within city	?	
4 Miles North o.	* Copeland			
2 WATER WELL OWNER:		Global Positioning Sy		
	iant Resources			
139	4 120th Road	Elevation:		
City, State ZIP Code: Cope land, 185 67837 Datum: Data Collection Method:				
3 MARK WELL'S LOCATION WITH AN "X" IN SECTION				
BOX:	WELL'S STATIC WATER LEVEL 275 ft			
N	WELL WAS USED AS:			
NW NE	WELL WAS OBED AS.			
1N VV	1 Domestic 5 Public Water Supply 9 Dewatering			
W - E	2 Irrigation	2 Irrigation 6 Oil Field Water Supply 10 Monitoring 7 Domestic (Lawn & Garden) 11 Injection Well		
SWSE	4 Industrial	8 Air Conditioning		·
5W 5L		_		
Was a chemical/bacteriological sample submitted to Department? YesNo				
S 5 TYPE OF BLANK CASING USED:				
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 surface in.				
6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout Bentonite 4 Other				
Grout Plug Intervals: From 10 ft. to 5 ft., From ft. to ft., From to ft.				
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 Warter Well				
3 Watertight sewer lines 8 Sewage lagoon 13 Insecticide storage 4 Lateral lines 9 Feedyard 14 Abandoned water well Direction from well?				
5 Cess pool 10 Livestock pens 15 Oil well/Gas well How many feet? 300				
	Penns 10 GM (1011) G	110,, 11111		
	· 1 0 000	FROM TO	PLUGGING MA	TERIALS
300 275 Chlor	ingited Sand			
275 10 Clay/.	3 4 6 5 00			
10 5 Bruto	nife			
5 - Cut-	of h Casing			
a Da	errill -			
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 This Water Well Record was completed on (mo/day/year) This water was				
husiness name of ζ_0 //		by (signature)		under the
- * OG(1 (W *) 1	Windmill		wed anns	
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: 785/296-5522. Send one to Water Well Owner and retain one for your				
records. Visit us at http://www.kdheks.go				·