WA	ATER WELL PLUGO	ING RE	CORD	Form WWC-	-5P		KSA 82a-1212	ID NO.	
I -	LOCATION OF WATER County: Ford	WELL:	Fraction 1/4	SE 1/4 SW 1/4	NW 1/4	Section Number	Township Numb		er E ✓ W
Street/Rural Address of Well Location; if unknown, distance and direction from nearest town or intersection. If at owner's address, check here Global Positioning Systems (GPS) Information: Latitude:									
5	1/2 mi. N of Minneola, I	lwy 283			Datum: WGS84 NAD83 NAD27 Collection Method:				
2	WATER WELL OWNER: Kansas Gas Service 12642 US Highway City, State ZIP Code Minneola, KS 67865			, 2 83		☐ GPS unit Make/Model: ☐ Digital Map/Photo ☐ Topographic Map ☐ Land Survey Est. Accuracy: ☐ <3 m ☐ 3-5 m ☐ 5-15 ☐ >15			
3	MARK WELL'S LOC. WITH AN "X" IN SEC BOX: N NW NE X SW SE S	E	WELI WELI Dom Irriga Feed Indus	ation Oilot Dostrial Ai	TER LEVER S: ablic Water S d Field Water comestic (Lav	Supply er Supply wn/Garden) ing	ft. Dewatering Monitoring Injection Well Other d to Department?		☑ No
5 TYPE OF BLANK CASING USED: Steel RMP (SR) Wrought Fiberglass Other: PVC ABS Asbestos/Cement Concrete Tile Blank casing diameter: 2 in. Was casing pulled? Yes No If Yes, how much 5' Casing height above or below land surface: in.									
6 GROUT PLUG MATERIAL: □ Neat cement □ Cement grout ☑ Bentonite □ Other:									
Grout Plug Intervals: From 1 ft. To 168 ft. From ft. To ft. To ft. From ft. To ft.									
	What is the nearest source of possible contamination: Septic tank Seepage pit Fuel storage Other (specify below): Fertilizer storage								
		☐ Fe	dyard — Abandoned water wen				rection from well:		
I F	FROM TO		GING MAT	ΓERIAL	FROM	ТО	PLUGGING	G MATERIAL	
╟	0 1 168	Native soil Bentonite				 			
$\ \cdot\ $	168 186.3	Gravel (2")	· · · · · · · · · · · · · · · · · · ·				Well #6		
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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) 9/10/2015 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 527. This Water Well Record was completed on (mo/day/year) 9/23/2015 under the									
		GeoCore I	_	by (signa		· // /	(o/day/year)	9/23/2015	under the
INSTRUCTIONS: Use typewriter or ballpoint pen. Please press firmly and print clearly. Please fill in blanks, underline or circle the correct answers. Send one copy 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.									