			WATER WELL PLUGGING R	ECORD Form WWC-5P	KSA 82a-1212 ID N	Ю	
1 LC	OCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number	
County: Kingman			C 1/4 NE 1/4 NW 1/4	25	29S	9 x w	
Distance and direction from nearest town or city street address of well if located within city? 3 North, 1 East of Zenda, KS							
2 WATER WELL OWNER: Edmiston Oil Company, Inc.							
RR #, St. Address, Box #: 125 N. Market, Suite 1130 City, State, ZIP Code : Wichita, KS 67202 Board of Agriculture, Division of Water Resources Application Number: 20010039							
1 1	ARK WELL'S LOCATION WITH N "X" IN SECTION BOX:			50 ft.			
	N	1	WELL WAS USED AS:				
	NW NE		1 Domestic	5 Public Water Supply	9 Dewater	ring	
			2 Irrigation 3 Feedlot	6 Oil Field Water Supp 7 Domestic (Lawn & G	lv 10 Monitori	ng Well	
w		E	4 Industrial	8 Air Conditioning	12 Other		
	-SW		Was a chemical / bacteriolo If yes, mo/day/yr sample wa	gical sample submitted to De	epartment? Yes	NoX	
	S		Water Well Disinfected: Ye	esX			
5 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							
Blank casing diameter							
0			eat cement 2 Cement gro		Other hole plug		
Grout Plug Intervals: From							
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	12 Fertilizer storage		
3 Watertight sewer lines 4 Lateral lines			8 Sewage lagoon9 Feedyard	13 Insecticide storage14 Abandoned water v			
5 Cess pool 10 Livestock pens 15 Oil well/Gas well							
Direction from well? East How many feet? 100 Feet							
FRO	м то	PL	JGGING MATERIALS				
50 F	eet Surface 11 sa	cks	of cement				
CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year)							
by (signature)							
INSTR	UCTIONS: Use typewriter or	ball	point pen. Please press fir	mly and print clearly. Plea	ase fill in blanks, underli	ne or circle the correct	
INSTRUCTIONS: Use typewriter or ball point pen. <u>Please press firmly</u> and <u>print</u> 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.							