				V	ATER WELL PLUGGING I	RECORD	Form WWC-5P	KSA 82a-	1212 ID Ņ	003305	96	
1 LOCATION OF WATER WELL:					Fraction	Section	Section Number		Township Number		Range Number	
County: Brown					E 14 NE 14 NE 14		29		2	17	E/W	
Dist				-	street address of well if lo	cated within	city?					
	100 0	regon,	HIawatha									
2	WATER WELL OWNER: Kloer				er Inc.							
RR #, St. Address, Box #: Box				Board of Agriculture, Divisi				Vater Resourc	es			
_	City, Star	City, State, ZIP Code : Hlaw			ha, KS 66434		pplication Number	*				
3	MAPIK WELL'S LOCATION WITH AN "X" IN SECTION BOX: N				4 DEPTH OF WELL		ft.					
					WELL'S STATIC WAT	ER LEVEL	42.81 ft.					
	NW NE X				WELL WAS USED AS	S:						
					1 Domestic 5 P	Public Water Supply		9 Dewaterin	ng			
	1				2 Irrigation	6 Oi	l Field Water Supp	ly	10 Monitorin	g Well		
w				E	3 Feedlot 4 Industrial		omestic (Lawn & G r Conditioning	arden)	11 Injection 12 Other			
					Mas a chamical / bactarial	lagical comm	ale aubmitted to De	nartment? Ve		do V		
-	SW SE				Was a chemical / bacteriological sample submitted to Department? Yes							
					Water Well Disinfected:	Yes	NoX					
		S										
5	TYPEC	F BLANK C	ASING USED:									
	1 Stee			Wrou	_	-	Other (Specify b	elow)				
	2 PVC				stos-Cement 8 Concr	rete Tile						
	Blank o	asing diamet	ter2 ii e or below land	n. d surfa	Was casing pulled?	Yes	No	X If	yes, how mu	ch		
_		F PLUG MAT			t cement 2 Cement gr		Bentonite 4 (Othor				
6		lug intervals:			ft. to5.6 f		ft. to				ft	
		o .	source of poss			,			,			
	1 Se	1 Septic tank			6 Seepage pit		Fuel storage	1	6 Other (spec	cify below)		
	2 Sewer lines3 Watertight sewer lines4 Lateral lines				7 Pit privy 8 Sewage lagoon		Fertilizer storage nsecticide storage					
					9 Feedyard	14 /	Abandoned water v					
	5 Ce	ess pool			10 Livestock pens	15 (Oil well/Gas well					
	Direction	on from well?		•••••	How man	ny feet?						
FROM TO PL			PLUG	GING MATERIALS								
	0	3	Bento	nito	(011)							
	3	56	Bento	nite	(2")							
							MW1R					
							GeoCore #87	71				
							KDHE #U4 007 01497					
7	CONT	RACTORIS	OF LANDON	WNED	'S CERTIFICATION: Th	ie water "	all was alugaed	under my :	urisdiction o	nd was com	nleted on	
	(mo/da	y/year)	1.2/21/20	0.5	527	and	I this record is tru	e to the best	of my knowle	dge and belie	ef. Kansas	
	Water W	Vell Contracto 128/2005	r's License No unde	rthe l	527 ousinassyname of	leo Core	This Wa	iter Well Rec	ord was comp	oleted on (mo	/day/year)	
	by (sig	nature)		Die	a RUI							
INS	STRUCTION	ONS: Use t	ypewriter or	ball po	oint pen. <u>Please press f</u> i	irmly and p	orint clearly. Plea	se fill in blar	nks, underlin	e or circle th	e correct	
					Department of Health							

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.