$\mathbf{W}_{\mathbf{A}}$	ATER WELL PLUGGING RI	ECORD Form WW	C-5P KSA 82a-	-1212 ID NO. └		
1	LOCATION OF WATER WELL: County: Republic	Fraction	Section Number 24	Township Number	Range Number E/W	
Distance and direction from nearest town or city street address of well if located within city?						
from Rydal restarea on Hwy36, 3 miles N. 1 mile W, 5/8 mile N, 300 yards E						
2	WATER WELL OWNER: Ernest J. M. Kcsell Global Positioning Systems (decimal degrees, min. of 4 dig Latitude:					
	RR#, St. Address, Box #: 1184 Lincoln Rd City, State ZIP Code: Republic, KS Leve 9144		Longitude:	Longitude:Elevation:		
			Datum:	Datum:		
	NAME OF TAXABLE OF TAX			nou.		
3	WITH AN "X" IN SECTION					
	BOX:	WELL'S STATIC WATER LEVEL 15 ft				
		WELL WAS USED	WELL WAS USED AS:			
	NW NE 1 Domestic 5 Public Water Supply 9 Dewatering				itering	
,,,		2 Irrigation	6 Oil Field Water Supply 10 Monitoring		itoring	
"	4 Industrial 8 Air Conditioning 12 Other					
	Was a chemical/bacteriological sample submitted to Department? YesNo_X					
5	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					
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	Blank casing diameter 26 in. Was casing pulled? Yes X No If yes, how much Casing height above or below land surface 60 in.					
6	Grout Plug Intervals: From $4^{\frac{1}{2}}$ 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					
	4 Lateral lines 9 Feedyard 14 Abandoned water well Direction from well?					
	5 Cess pool					
		GING MATERIALS	FROM TO	PLUGGING MA	ATERIALS	
	0' 4½' top so	1				
	45' 5' Bento	nite plug				
	5' 202' Gravel	4 Chlorine				
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) <u>Nec 14 2012</u> 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) Dec. 18, 2012 under the business name of by (signature)						
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.gov/geo/waterwells.						