$\mathbf{W}_{\mathbf{A}}$	ATER WELL PLUGGING RE					
1	LOCATION OF WATER WELL: County: Haske	Fraction NW1/4 SW1/4 SF1/4	Section Number	Township Number	Range Number	
	Distance and direction from nearest to	own or city street address of w	ell if located within city:	?		
	2 Miles East of Satanta					
2	WATER WELL OWNER: M: k	er Blair	Global Positioning Sy Latitude:			
	RR#, St. Address, Box #: 755	RA 230	Longitude:Elevation:			
	City, State ZIP Code: Satan	ta, KS 67870	Datum:			
3	MARK WELL'S LOCATION	4 DEPTH OF WELL	_	u.		
3	WITH AN "X" IN SECTION					
	BOX: WELL'S STATIC WATER LEVEL Dry ft					
	WELL WAS USED AS:					
	NW NE 1 Domestic 5 Public Water Supply 9 Dewatering 6 Oil Field Water Supply 10 Monitoring 7 Domestic (Lawn & Condon) 11 Injection Well					
l w	7 E	2 Irrigation	6 Oil Field Water Sup	ply 10 Moni	toring	
"		3 Feedlot4 Industrial	/ Domestic (Lawn &	Garden) 11 mjec	uon wen	
	Was a chemical/bacteriological sample submitted to Department? YesNo_X					
5						
	(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: Neat cement 2 Cement grout 3 Bentonite 4 Other Grout Plug Intervals: Fromft. toft., Fromft. toft. 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 3 Watertight sewer lines 8 Sewage lagoon 13 Insecticide storage 4 Lateral lines 9 Feedyard 14 Abandoned water well 5 Cess pool 10 Livestock pens 15 Oil well/Gas well 15 Oil well/Gas well 16 Other (specify below) 16 Other (specify below) 17 Fuel Storage 16 Other (specify below) 18 Feedyard 14 Abandoned water well 17 Direction from well?					
			FROM TO	PLUGGING MA	TERIALS	
	302 10 Clay	/ Subsoil				
	10 / Cem					
	- Cu'	off Casing ?				
	Bac					
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 8 5 6 man and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 805 This Water Well Record was completed on (mo/day/year) 9 moder the business name of 5 cuth was 1 with						
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.						