				WAT	ER WELL F	LUGGING	RECORE) Fo	rm WWC-5	P KSA 8	32a-121	2 ID N	O			
1		ION OF WATE			Fraction S NE, NW, NE 1/4, 1/4, 1/4 City street address of well if located w				ection Number Township			3				
		umn 4							2	$ \mathcal{S}C $) South 04 E					
DIS	ance and	direction nom						riiri City	ŗ							
2		R WELL OWNE	R: RA	MOHD E SU	E MAR ELHTA TE PD	21E SN	BUL	Poars	of Agricults	ıre, Division	of Mot	or Popour				
		te, ZIP Code	1363	NWAY	SPRI	40 KJ	0/1001	Applic	ation Numb		OI Wale					
3	MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:				depth of well											
	NM	N			WELL WAS USED AS: 1 Domestic 2 Irrigation 6 Oil Field Water Supply 10 Monitoring Well											
W					4 Inc	edlot dustrial	8	Air Cor	tic (Lawn &	·	12					
	sw		If y	Was a chemical / bacteriological sample submitted to Department? Yes												
	TVDE	S OF BLANK CA	CINC LISED:													
5	1 Stee	Э З ВМЕ	P (SR) 5	Wrought Asbestos	-Cement	7 Fiber 8 Conc	glass rete Tile		ner (Specify	below)						
	Blank o Casing	casing diamete height above	or	n. d surface	Was cas	ing pulled?	Yes	3	No	X	If ye	s, how mu	ch <i>Cú7</i>	- OFF		
6		r PLUG MATE Plug Intervals:		Neat ce	ment 2	Cement g		3 Bent		Other				o ft.		
	_		ource of poss	sible conta	contamination:											
1 Septic tank 2 Sewer lines 3 Watertight se 4 Lateral lines				7 8 9	Feedyard	Pit privy 1: Sewage lagoon 1: Feedyard 1:			12 Fertilizer storage 13 Insecticide storage 14 Abandoned water well				6 Other (specify below)			
		ess pool on from well? .	N/Y		Livestock	•			ell/Gas well							
FROM		TO 09			UGGING MATERIALS				Beile	11116	K	EMOU	En			
7/	#1710 8	28 3 6		LAY	SOIL	,			Ł	PIPE	: (CUT	26"			
36		39			- GROC				Rei	ow 6			Ċ			
39		44/2	_		36"	•	GOOF		FILLE	000 G	1 Paux	VD	SITE			
										-3-2)			
7	Water V	RACTOR'S C y/year) Vell Contractor's 10-30- nature)	s License No. under	the bus	iness/nam	e,of	JOE	54	vas plugge record is t This V ECHTA	ed under m rue to the b Vater Well F	ny juris est of n Record	diction a ny knowle was comp	leted on (m	mpleted on lief. Kansas no/day/year)		
INS ans	STRUCTI swers. Se	ONS: Use typed to the contract of the contract	pewriter or to copies to K	oall point ansas De	pen. <u>Plea</u> epartment	se press f of Health	firmly and and and	d <u>print</u> ironme	clearly. Ple ent, Bureau	ease fill in t u of Water,	blanks, Geolo	underline gy Sectio	e or circle t	the correct N Jackson		

St., Ste. 420, Topeka, Kansas 66612-1367. Telephone: 785/296-5522. Send one to Water Well Owner and retain one for your records.