	WATER WELL PLUGGING RE	CORD Form WWC-5P	KSA 82a-1212 II	D NO
1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Numbe	r lange Number
County: KINGMAN	SENNWANEN	10	30	5 EW
Distance and direction from nearest town or o	aty street address of well if local			
438 E. Ist.	NORWICH, KS.	6/1/8		
WATER WELL OWNER: RR #, St. Address, Box #:		Desired of Assistations	Divinion of Water Bear	Nuroos .
City, State, ZIP Code : AME Application Number:				idices
3 MARK WELL'S LOCATION WITH	4 DEPTH OF WELL			
AN "X" IN SECTION BOX:	WELL'S STATIC WATER	RLEVEL(
	WELL WAS USED AS:			
NW XNE	1 Domestic (2 Irrigation)	5 Public Water Supply 6 Oil Field Water Supply		~ 61
W	3 Feedlot 4 Industrial	7 Domestic (Lawn & G 8 Air Conditioning	,	on Well
		_		H.,
SE SE Was a chemical / bacteriological sample submitted to Department? Yes				
S	Water Well Disinfected: Yes	NoX		
TYPE OF BLANK CACING HEED.				
	ought 7 Fibergle	ss 9 Other (Specify b	elow)	
2 PVC 4 ABS 6 As	pestos-Cement 8 Concreti	n Tile		
Blank casing diameter	Was casing pulled?	Yee No	.K If yes, how	much ,
1 5 1	eat coment 2 Cement grou	Bentonite 4 (Other SAND +6	15 10 18 11
Grout Plug Intervals: From .R. What is the nearest source of possible	contamination:	From) II., FIOII	10
1 Septic tank	6 Seepage pit	11 Fuel storage		specify below)
(2 Sewer lines) 3 Watertight sewer lines	7 Pit privy8 Sewage lagoon	12 Fertilizer storage13 Insecticide storage		
4 Lateral lines 5 Cess pool	9 Feedyard 10 Livestock pens	14 Abandoned water v15 Oil well/Gas well	vell	
Direction from well? 64.7.5.14E		leet? APPROX 8	0 '	
FROM TO PL	E Y UGGING MATERIALS			
) & GRAVEC			
	ON ITE			
	CRETE / CONCRE	īE		
7 CONTRACTOR'S OF LANDOWN	ER'S CERTIFICATION: This	water well was plugged	under my jurisdiction	n and was completed on wiedge and belief. Kansas
(mo/day/year)	N/A HOMEDWA	This Wa	ter Well Record was co	ompleted in (mo/day/year)
by (signature) Reclease Turson 4-15-07				
INSTRUCTIONS: Use typewriter or ball	point pen. Please press firm	nly and print clearly. Plea	se fill in blanks, under	rline or celle the correct
answers. Send top three copies to Kans St., Ste. 420, Topeka, Kansas 66612-13	sas Department of Health an 867. Telephone: 785/296-552	io ≞nvironment, Bureau o 22. Send one to Water W	ਗ vvater, Geology Sed 'eli Owner and retain ⊢	nion, Total SW Jackson one for year records.