WATER WELL PLUGGING RECORD	Form WWC-5P	KSA 82a-1212	ID NO.	
1 LOCATION OF WATER WELL: County: Clark	Fraction NE ¼ SW ¼ N	Section Number 12	33S	Range Number 23W
Distance and direction from nearest town or city street address of well if located within city?				
900 S. Main, Ashland, KS 67831				
2 WATER WELL OWNER: MWH, Inc. Global Positioning System (decimal degrees, min. of 4 digits)				
(Mike Harden) Latitude: NA RR#, St. Address, Box #: PO Box 97 Longitude: NA				
Elevation: NA				
City, State, ZIP Code: Ashland, KS 67831 Datum: NA Data Collection Method: NA				
3 MARK WELL'S LOCATON 4 DEPTH OF WELL 44.72 ft. MW2				
WITH AN "X" IN SECTION BOX:	WELL'S STATIC	WATER LEVEL	NA ft.	
N	WELL WAS USED AS:			
- NWNE-	1 Domestic 5 Public Water Supply 9 Dewatering 2 Irrigation 6 Oil Field Water Supply (10) Monitoring			
W E 2 Imgation 6 On Field Water Supply 10 Monitoring 11 Injection Well				
SW—SE— 4 Industrial 8 Air Conditioning 12 Other				
We are least in large la				
s was a chemical/bacteriological sample submitted to Department? YesNo_X				
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				
Blank casing diameter 2 in. Was casing pulled? Yes x No If yes, how much 3ft Casing height above or below land surface NA in.				
6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other Soil: 0-3ft				
Grout Plug Intervals: From 3 ft. to 44.72 ft., From ft. to ft., From ft. 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 3 Watertight sewer lines 8 Sewage lagoon 13 Insecticide storage				
3 Watertight sewer lines 8 Sewage lagoon 13 Insecticide storage 4 Lateral lines 9 Feedyard 14 Abandoned water well Direction from well?				
5 Cess pool 10 Livestock pens 15 Oil well/Gas well How many feet?				
FROM TO PLUGGING M		FROM TO	PLUGGING MA	ATERIALS
0 3 So 3 44.72 Bento				
3 44.72 Bene	mic			
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was				
completed on (mo/day/year) 1/15/15 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 757 This Water Well Record was completed on (mo/day/year) 1/26/15 under the				
Well Contractor's License No This Water Well Record was completed on (mo/day/year) under the business name of Larsen and Associates, Inc by (signature)				
INSTRUCTIONS: Please fill in blanks or circle the correct answers. Send top three topies to Kansas Department of Health and				
Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Ste. 420, Topela 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/waterwell.				