	WATER WELL PLUGGING RECO	RD Form WWC-5P KSA	82a-1212 ID NO. —	
1 LOCATION OF WATER WELL:	Fraction AE SE	Section Number	Township Number	Range Number
Distance and direction from nearest jown or	city street address of well if lo	cated within city?	717	1) 7 "
2 Miles West	of Liberal			
2 WATER WELLOWNER: NEL H	latcher + D.			
2 WATER WELL OWNER: Nich H RR #, St. Address, Box #: City, State, ZIP Code : Libero	21, KS 67901	Board of Agriculture, Application Number:	Division of Water Resource	ees
3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4 DEPTH OF WELL	150 ft		
N	WELL'S STATIC WATER	LEVEL 145 ft.		
	WELL WAS USED AS:			
N W ———— N E ———	Domestic	5 Public Water Supp	oly 9 Dewa	atering
	2 Irrigation 3 Feedlot	6 Oil Field Water Su 7 Domestic (Lawn &		toring Well tion Well
W X E	4 Industrial	8 Air Conditioning		r
S WS E	Was a chemical / bacter	ological sample submitte	d to Department?Yes.	No
	If yes, mo/day/yr samp		•••••	
	Water Well Disinfected:	Yes No		
5 TYPE OF BLANK CASING USED:				
	rought 7 Fiberg	lass 9 Other (Specify	/ below)	
2 PVC 4 ABS 6 As	sbestos-Cement 8 Concre	te Tile	• -	
Blank casing diameterin. Casing height above or below land	Was casing pulled? surface	Yes No in.	If yes, how	much
6 GROUT PLUG MATERIAL: 1 No	eat cement 2 Cement gro	ut 3 Bentonite 4 0	Other	
Grout Plug Intervals: From	ft. to ft.	, From ft. to	oft., From	to ft.
What is the nearest source of poss		·		
1 Septic tank 2 Sewer lines	6 Seepage pit7 Pit privy	11 Fuel storage12 Fertilizer storage	•	specify below)
3 Watertight sewer lines	8 Sewage lagoon	13 Insecticide store	age	
4 Lateral lines 5 Cess Pool	9 Feedyard 0 Livestock pens	14 Abandoned wat15 Oil well/Gas we		
Direction from well? E.e.s.	How man	y feet?		
FROM TO PLU	GGING MATERIALS			
	116	<u> </u>		
150 145 Chlori	61.1			
145 6 Clay/)4] 50. [
6 S CAME	M			
3 - Cat-	off Casing	7		
Ba	ict dill			
7 CONTRACTOR'S OR LANDOWN on (mo/day/year)	FR'S CERTIFICATION: Th	is water well was plugg	ed under my jurisdict	ion and was completed
Water Well Contractor's License No		and this record is true	e to the best of my know Water Well Record was c	ompleted on (mo/day/year)
by (signature) under th	e business name of	JOYTHWEST W	in Am j. I.I.	
INSTRUCTIONS: Use typewriter or be answers. Send top three copies to keep	Cansas Department of Hea	lth and Environment, Bu	ease till in blanks, unde Ireau of Water, Topek	rime or circle the correct a, Kansas 66620-0001.
Telephone: 785/296-3565. Send one to V	Vater Well Owner and retain o	ne for your records.	•	