		WATER WELL PLUGGING RECOR	RD Form WWC-5P	KSA 82a-1212	ID NO.			
1 LOCATION OF WATER WELL:		Fraction	Section Num	ber Township	Number	Range	Number	
County: SewALD		SE 1/4 SW 1/4 SE 1/4	6	35	5	33	W	
Distance and direction from nearest town or city street address of well if located within city?								
Α.								
2 WATER WELLOWNER: TRC ENVIRON MENTA (CORP. 2313 W. SAM HOUSTON PKy STE 107 BOARD of Agriculture Division of Water Resources								
	RR #, St. Address, Box #: City, State, ZIP Code : Horston TK 77043 Board of Agriculture, Division of Water Resources Application Number:							
177 6								
AN "X" IN SECTION BOX: AN "X" IN SECTION BOX: AN "X" IN SECTION BOX: Control of Well A A A A A A A A A								
WELL'S STATIC WATER LEVEL ft.								
		WELL WAS USED AS:						
N	W ——— N E ——	1 Domestic	5 Public Water	, , ,	9 Dewate	ering	ر ₋ ۲	
		2 Irrigation 3 Feedlot	6 Oil Field Wa 7 Domestic (I	ater Supply Lawn & Garden)	10 Monito	ring Well Of	PER	
w	F		8 Air Conditio					
Was a chemical / bacteriological sample submitted to Department?Yes								
	If yes, mo/day/yr sample was submitted							
S Water Well Disinfected: Yes No								
5 TYPE OF BLANK CASING USED:								
L								
2 PVC 4 ABS 6 Asbestos-Cement 8 Concrete Tile								
Blank casing diameter in. Was casing pulled? Yes No								
6 GROUT PLUG MATERIAL: 1 Neat cement Cement grout 3 Bentonite 4 Other								
Grout Plug Intervals: From ft. to ft., From ft. to ft., From ft., From ft.,								
What is the nearest source of possible contamination:								
1	eptic tank ewer lines		11 Fuel storage 16 Other (specify below)					
	atertight sewer lines	7 Pit privy8 Sewage lagoon		12 Fertilizer storage				
4 La	iteral lines	9 Feedyard 10 Livestock pens	14 Abandon	ed water well				
'								
Direction from well?								
FROM	TO PLU	JGGING MATERIALS						
116.5	O Cenur	SPORT						
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed								
CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No								
by (signature) Roll Grant States are of Grant Warm Manitorny								
by (sign	ature) (Ko.DO) (LIAILS							
INSTRUCT	FIONS: Use typewriter or b	eall point pen. <u>Please press fire</u>	mly and print clear	rly. Please fill in blar	nks, underlin	e or circle th	e correct	
answers. Send top three copies to Kansas Department of Health and Environment, Bureau of Water, Topeka, Kansas 66620-0001. Telephone: 785/296-3565. Send one to Water Well Owner and retain one for your records.								