			WATER WELL PLUGGING RECC	RD Form WWC-5P KS/	A 82a-1212	ID NO		
1 LOCATIO	ON OF WATER WE	LL:	Fraction	Section Number	Township	Number	Range	Number
County: 54	QUIARS		SE 14 SW 14 SE 14	6	35	5	33	W
			city street address of well if lo	cated within city?				
2 WATER W RR #, St. A City, State,	VELLOWNER: Toddress, Box #: 2	RC EN 313 W Houston	Vikus martal Cony 1, SAM HOUSTON P	Application (tumber)		ater Resource	s	
	ELL'S LOCATION N SECTION BOX:		DEPTH OF WELL	LEVEL ft.		o Barrel		. n. 1
w W		E	1 Domestic 2 Irrigation 3 Feedlot 4 Industrial	5 Public Water Sup 6 Oil Field Water Su 7 Domestic (Lawn & 8 Air Conditioning	upply	11 Injection	oring Well on Well	
s w	s s		Was a chemical / bacter If yes, mo/day/yr sampl Water Well Disinfected:	e was submitted		nent?Yes	No	<u> </u>
5 TYPE OF	BLANK CASING	USED:						
1 Steel	3 RMP (SF 4 ABS	,	ought 7 Fiberg		y below)			
	sing diameter 	2in.	Was casing pulled?	Yes No			uch	
	PLUG MATERIAL		at cement 2 Cement ground to 2		Other ft.			f
	•		ole contamination:	•				
2 Sew 3 Wat 4 Late	itic tank ver lines tertight sewer line eral lines is Pool	es	6 Seepage pit7 Pit privy8 Sewage lagoon9 Feedyard10 Livestock pens	11 Fuel storage 12 Fertilizer storag 13 Insecticide stor 14 Abandoned wat 15 Oil well/Gas we	ge rage ter well		ecify below)	
Direction	on from well?		How many	/ feet?				
FROM	то	PLUG	GING MATERIALS					
114	0 G	ment "	Ster					
		(·					

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. 729 This Water Well Record was completed on (mo/day/year) under the business name of Solar Market Well Record was completed on (mo/day/year) by (signature) 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 Record was completed on (mo/day/year) was plugged under my jurisdiction and was completed on (mo/day/year).

INSTRUCTIONS: Use typewriter or ball point pen. <u>Please press firmly</u> and <u>print</u> clearly. Please fill in blanks, underline or circle the 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.