WATER WELL PLUGGING RECORD

Form WWC-5P

KSA 82a-1212

Devised ID NO. MW-1

1	LOCAT	ION OF WATER	WELL:	F	Fraction	Sect	ion Number	Township	Number	Range	Number	
Cou	ınty:	Semont	,	N	ENENE	4	·	35	7	33	E/ (
Distance and direction from nearest town or city street address of well if located within city?												
<u></u>		761	E	/ >	mcake Blu	1	Ciberal					
2	WATER	R WELL OWNER	$\mathcal{C} = \mathcal{C}$	col	trye	P						
		t. Address, Box # te, ZIP Code	#: :	12	singsland TX	786	Board of Agriculture	e, Division of V	Water Resource	es		
3		WELL'S LOCATION WITH IN SECTION BOX:		4	MELL'S STATIC WATE	-	_					
[N 🛩				WELL WAS USED AS:		,					
	NW	,	NE -		1 Domestic		Public Water Supply		9 Dewateri	ng		
	NV	/			2 Irrigation 3 Feedlot	6 (Oil Field Water Supp Domestic (Lawn & G	oly	Monitorir 11 Injection	ng Well		
w				E	4 Industrial		Air Conditioning	lardon)	, , , , , , , , , , , , , , , , , , , ,			
					Was a chemical / bacteriolo	ogical san	nple submitted to De	epartment? Y	es I	No.		
SW ————————————————————————————————————												
Water Well Disinfected: Yes No												
<u></u>		S										
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	in.		Was casing pulled?	Yes	X No		f yes, how mu	ch3	}	
	Casing	g height above o	r below land	surfac	ce OLT	in.	•					
6		T PLUG MATER			cement 2 Cement gro							
Г		Plug Intervals:			ft. to ft	., From	nft. to	ot	, From	to .	ft.	
What is the nearest source of possible contamination: 1 Septic tank 6 Seepage pit 1 Juel storage									16 Other (spe	cify below)		
2 Sewer lines					7 Pit privy 8 Sewage lagoon	12	10 Familians standard					
3 Watertight sewer lines 4 Lateral lines					9 Feedyard	14	Abandoned water					
5 Cess pool Direction from well?					10 Livestock pens	15	Oil well/Gas well					
	Directi	ion from well?	(Te	(25	How many	y feet?		•••••				
	FROM	то	F	PLUG	GING MATERIALS							
					ĺυ .							
-	7	0	h .d	1	ly Soil							
	<u>ح</u>		rat	746	301							
						-						
7	CONT	RACTOR'S OF	LANDOW	NER'S	S CERTIFICATION Thi	s water	well was plugged	under my	urisdiction a	nd was com	pleted on	
	(mo/da Water \	ay/year) Vell Contractor's	License No	<i>J</i> .	usiness name of	ar	ia this record is tru This Wa	e to the best iter Well Rec	or my knowle ord was com	age and belle pleted on (mo	ər. Kansas ə/day/year)	
	 hv (eid	nature)	under	the b	usiness name of	J	alsnie Cu	sperg				
				_								
					nt pen. <u>Please press find</u> Department of Health a							
answers. Send top three copies to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Ste. 420, Topeka, Kansas 66612-1367. Telephone: 785/296-5522. Send one to Water Well Owner and retain one for your records.												