				WATER WELL PLUGGING R	ECORD F	Form WWC-5P	KSA 82a-	1212 ID N	0		
1	LOCAT	ION OF WAT	ER WELL:	Fraction	Section	Number	Township	Number	Range	Number	
County: Morton				HE NE HE	8	35 -	35N		4 2W	E/W	
Distance and direction from nearest town or city street address of well if located within city?											
2											
		t. Address, Bo te, ZIP Code	x #: 10011 Housto	Meadowglen Lane, Ste 100 Board of Agriculture, Division of Water Resources Application Number:							
3		WELL'S LOC	ATION WITH	4 DEPTH OF WELL	4 DEPTH OF WELL						
		IN SECTION		WELL'S STATIC WATER LEVEL150 ft.							
	N X NE NE E			WELL WAS USED AS:							
				Domestic 5 Public Water Supply 9 Dewatering							
w				2 Irrigation	6 Oil Field Water Supply 7 Domestic (Lawn & Garden) 8 Air Conditioning 9 Dewatering 10 Monitoring Well 11 Injection Well 12 Other						
				3 Feedlot 4 Industrial							
				Was a chemical / bacteriological sample submitted to Department? Yes							
	SW SE			If yes, mo/day/yr sample was submitted							
		S		Water Well Disinfected: Yes No							
5	TYPE OF BLANK CACING LICED.										
1 Steel 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (Specify below)											
©PVC 4 ABS 6 Asbestos-Cement 8 Concrete Tile											
Blank casing diameter in. Was casing pulled? Yes No											
6											
Grout Plug Intervals: From250 ft. to											
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 Fer	tilizer storage					
3 Watertight sewer lines 4 Lateral lines				8 Sewage lagoon9 Feedyard		ecticide storage indoned water v					
5 Cess pool				10 Livestock pens	15 Oil	well/Gas well					
Direction from well? How many feet?											
FROM TO PLI				UGGING MATERIALS							
	250	5	Calement (Grout							
	5 Surface Backfill										
			, "								
7	7 CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on										
(mo/day/year)											
5/07/09											
<u> </u>				autic f							
INSTRUCTIONS: Use typewriter of ball point pen. <u>Pléase 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, 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.