WATER WELL PLUGGING RECORD

Form WWC-5P

KSA 82a-1212

ID NO._____

1	LOCATION OF WATER WELL:			Fraction	Section	Númber	Township Numbe	Range	Number
	ınty:	Smit	<u>h</u>	NE14 NE14 NE 14	21		35	13	EW
Distance and direction from nearest town or city street address of well if located within city? SE Corner US 36 + 281 Hwy Smith Center Mw-2									
		E Lo	rner	47 36 4 781	HWYJ	mith	Conter	M	W-2
2	WATE	R WELL OWN	ER: Allen	MiNerney	/			•	
WATER WELL OWNER: Allen M'Nerney RR #, St. Address, Box #: City, State, ZIP Code : Jt beorge K 5 66533 Application Number: Board of Agriculture, Division of Water Resources Application Number:									į
3		WELL'S LOC	ATION WITH	4 DEPTH OF WELL		ft.			
_	AN X	IN SECTION	BUX:	WELL'S STATIC WATE	.YY ft.				
₩ELL WAS USED AS:									
1	NV	/	— NE	1 Domestic		Water Supply	9 Dewat	-	
				2 Irrigation 3 Feedlot		d Water Suppl tic (Lawn & Ga			
W			E	4 Industrial	8 Air Con				
-	SWSF Was a chemical / bacteriological sample submitted to Department? Yes								
f	SW SE If yes, mo/day/yr sample was submitted to Department? Yes								
	Water Well Disinfected: Yes No								0
_		S		Training tra					
5 TYPE OF BLANK CASING USED:									
1 Steel 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (Specify below)									
Blank casing diameter									
Casing height above or below land surface in.									
GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other									
Grout Plug Intervals: From									o ft.
What is the nearest source of possible contamination:									
1 Septic tank				6 Seepage pit		Fuel storage 16 Other (specify below)			
	2 Sewer lines3 Watertight sewer lines			7 Pit privy 8 Sewage lagoon		zer storage ticide storage		•••••	
	4 Lateral lines			9 Feedyard	doned water v	vell			
5 Cess pool			ME	10 Livestock pens		ell/Gas well			
Direction from well?									
FROM TO PLUGGING MATERIALS									
	25	2		ntunite					
	<u>7</u>		_	- 1					
	<u></u>	2,0	্ৰত						
(<i>)</i> .5	$\cup \mathcal{U}_{-}$	Co	ncrete					
			_						
CONTRACTOR'S OF 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									
(mo/day/year)									
Water Well Contractor's License No									
	by (sig	nature)	Petro	y certain.		<u>'</u>	<i>a</i>		
INSTRUCTIONS: Use typewriter or ball point pen. Please press firmly and print 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.