\	WATER W	ELL PLU	GGING RECORD	Form WWC-5P	KSA 82a-1212	ID No.	TH-5	
1 LOCAT			L: Fraction		Section Number	Township Number	Range Number	
County:	Rav	wlins	SE 1/4	SW 1/4 NE 1/4	8	3 S	33 W	
Distance	and directi	on from n	earest town or city	street address of well if	located within city?			
2 haratter	WELL OW	MED. Com	norla Caon					
	Address, B				Board	of Agriculture, Divisio	n of Water Resources	
City. State	e. ZIP Cod	e : Atwo	od, KS 67730			ation Number:		
3 MARK V	WELL'S LO	CATON W DX:	THAN 4 DEPTH	OF WELL 32.5				
	N		l l					
WELL'S STATIC WATER LEVEL								
		1_	WELL W	AS USED AS:				
<b></b> -	W	NE	1 .	Domestic 5 Pul	blic Water Supply	9 Dewater		
w I	,	K .	· ·		Field Water Supply	(10 Monitoria		
		i	<b>-</b> ,	Feedlot 7 Lav	vn and Garden (domesti			
	, I	i e	1 1 4	industrial 8 Air	Conditioning	12 Other _		
Was a chemical/bacteriological sample submitted to Department? Yes No								
If yes, mo/day/yr sample was submitted  Water Well Disinfected: Yes No								
	\$			1811110 GCGC: 1 00	179			
<del></del>	OF BLANK C			hi 7 Elhandan	a Other (s	ancië, halaut		
1 Steel 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (specify below) (2)PVC 4 ABC 6 Asbestos-Cement 8 Concrete Tile								
Carrier   Carrier   Concrete Tile   Concrete Tile								
Casing height above or below land surface in.								
6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout (3)Bentonite 4 Other								
				•				
Grout F	Plug interval	s from	n. to	it. From	T. to	,π. From	,π. ю	
What is	the neares	t source of	possible contaminati	on:				
1 Septic tank			6 Seepage pit	11)Fuel	storage	16 Other (specify)	balow)	
2 Sewer lines			7 Plt privy		lizer storage	************		
3 Watertight sewer lines			8 Sewage lago		cticide storage ndoned water well			
4 Lateral lines 5 Cess Pool			9 Feedyard 10 Livestock per		vet/ Gas well			
			10 montour per					
Direction fr	om well?			How many	/ feet?			
FROM								
0	32.5		Bentonite chi	os				
· · · · · · · · · · · · · · · · · · ·								
7 CON	TRACTOR	'S OR LAI	UDOWNER'S CERT	FICATION: This water we	ell was niumand under n	w luciadiation and was	romniated	
CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/yr) 11/8/15 and this record is true to the best of my knowledge and belief. Kanasa								
Wat	er Well Co	ntractor's	License No.		This Water Well	Record was complete	d on (mo/day/yr)	
	11/	18/15	under the I	violences name of /	Rluestem	Environmental Engineering	, Inc.	
by	(signature)	)		Nin	logat			
INST	RUCTION	S: Pleas	fill in blanks and	circle the correct answ	ers. Send three cop	ies to Kansas Depart	ment of Health and	
Environment, Bureau of Water, 1000 S W Jackson St., Ste. 420, Topeka, Kansas 66620-0001. Telephone: 785-296-3585.  Send one to Water Well Owner and retain one for your records.								
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