	1	WATER V	NELL P	L PLUGGING RECORD						FORM V	MWC-5P	KS	KSA 82a-1212			
1 LOCATION	Fra	Fraction					Section Number			Townshi	p Numb	per	Range Number			
County: (Cheyenne	,	N	W	1/4	NE	1/4	NW	1/4	2	22		3		41	
	and direction					street a					hin city?					
RR#, St. A	2 WATER WELL OWNER: Harvey Zwygardt RR#, St. Address, Box # City, State, ZIP Code : St. Francis, Ks 67756 Board of Agriculture, Division of Water Resources Application Number: 20030298															
_ MARK V	NELL'S LOC	ATON WIT	THAN	.								<u> </u>	,,,,			
ARK WELL'S LOCATON WITH AN 4 DEPTH OF WELL 160 ft. WELL WAS USED AS: WELL WAS USED AS: 1 Domestic 5 Public Water Supply 9 Dewatering 2 Irrigation 6 Oil Field Water Supply 10 Monitoring Well 3 Feedlot 7 Lawn and Garden (domestic) 11 Injection Well 4 Industrial 8 12 Other Was a chemical/bacteriological sample submitted to Department? Yes No X If yes, mo/day/yr sample was submitted Water Well Disinfected: Yes X No 5 TYPE OF BLANK CASING USED: 1 Steel 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (specify below) 2 PVC 4 ABC 6 Asbestos-Cement 8 Concrete Tile Blank casing diameter in Was casing pulled? Yes No X If yes, how much Casing height above or below land surface 18 in. 6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other Grout Plug Intervals From ft. to ft. From ft. to ft. From ft. to ft.																
Grout Plug Intervals Fromft. toft. toft. Fromft. toft. Fromft. toft. Fromft. ft. ft. ft. ft. ft. ft. ft. ft. ft.																
2 Se	7 P	Pit privy	у			12 F	12 Fertilizer storage					•				
-				Sewage	•	on				ticide stora	•					
				Feedya		-			14 Abandoned water well 15 Oil well/ Gas well							
			10 1	Livesto	ск реп	18										
Direction fro	om well?							How m	iany f	eet?	·					
FROM	ТО	CODE				PLUG	GING N	MATERIA	LS							
160	120		Washe	ed sa	nd					\$1\$00 . S. 100						
120	6	 	Clay													
6	3		Bentonite													
		1	W													
3	0	 	topsoil	!												
7 CON	TRACTOR'S	S OR LAN	IDOWNF	ER'S (CERT	IFICAT	ION: TI	his water	r well	i was plug	aed under i	mv iurisdicti	on and	was co	ompleted	
	mo/day/yr)		_												nd belief. Kansas	
	er Well Con		License				55								on (mo/day/yr)	
		1-05				ousine						fter Pump				
by	(signature)															
															nent of Health and	
Enviro	onment, Bu	ureau of \	Water, 1	Topel	ka, K	ansas	66620)-0001.	Tele	ephone:	785-296-3	3565. Sen	d one to	o Wat	er Well Owner and	
retain	n one for yo	our record	ds.													