WATER WELL PLUGGING REC	CORD Form WWC-5P	KSA 82a-1212 ID NO. MW-4	
1 LOCATION OF WATER WELL: County Republic	Fraction 1/4 NE 1/4 SW 1/4 S	SW 1/4 Section Number Township Number Range Number 5 SW 1/4 C1 S S S S S S S S S S S S S S S S S S	· w
Street/Rural Address of Well Location; if unknown, distance and direction from nearest town or intersection. If at owner's address, check here   Global Positioning Systems (GPS) Information:  Latitude: 39.770255 (in decimal degrees)  Longtitude: -97.890272 (in decimal degrees)  Elevation:			
~1 mi S of Courtland		Datum: ✓ WGS84 ☐ NAD83 ☐ NAD27  Collection Method:	
2 WATER WELL OWNER: NuStar RR#, St. Address, Box # PO Box City, State ZIP Code San Ant	••	GPS unit Make/Model:  ✓ Digital Map/Photo ☐ Topographic Map ☐ Land Sur  Est. Accuracy: ☐ <3 m ☐ 3-5 m ☐ 5-15 m ☐ >15 r	
MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:  N  N  NE  N  S  E  S  S	WELL'S STATIC WATER WELL WAS USED AS:  Domestic Public Irrigation Old F Feedlot Dome Industrial Air C	ft.  R LEVEL: 9.71 ft.  ic Water Supply Dewatering Field Water Supply Monitoring estic (Lawn/Garden) Injection Well Conditioning Other  ogical sample submitted to Department? Yes N	— Io
5 TYPE OF BLANK CASING USED:  Steel RMP (SR) Wrought Fiberglass Other:  PVC ABS Asbestos/Cement Concrete Tile  Blank casing diameter: 2 in. Was casing pulled? Yes No If Yes, how much 3'  Casing height above or below land surface: in.  6 GROUT PLUG MATERIAL: Neat cement Cement grout Bentonite Other:			
Grout Plug Intervals: From 3 ft. To 12.78 ft. From ft. To ft. From ft. To ft. To ft. What is the nearest source of possible contamination:  Septic tank Seepage pit Fuel storage Other (specify below):			
☐ Watertight sewer lines ☐ Sewage lagoon ☐ Insecticide storage			
□ Lateral lines       □ Feedyard       □ Abandoned water well       □ Direction from well:         □ Cess pool       □ Livestock pens       □ Oil well/Gas well       How many feet:			
		ROM TO PLUGGING MATERIAL	
0 3 Native soil 3 12.78 Bentonite (			
		MW-4	-
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7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 7/24/2017 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 527. This Water Well Record was completed on (mo/day/year) 7/31/2017 under the business name of GeoCore Inc. by (signature)			
INSTRUCTIONS: Use typewriter or ballpoint pen. Please press firmly and print clearly. Please fill in blanks, underline or circle the correct answers. Send one copy to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Ste. 420, Topeka, Kansas 66612-1367. Telephone 785/296-5524. Send one to Water Well Owner and retain one for your records. Visit us at http://www.kdheks.gov/waterwell/index.html.			