				WATER WELL PLUGGING RECORD Form WWC-5P KSA 82a-1212 ID NO							
1 LOCATION OF WATER WELL:				Fraction	Section	Number	Township	Number	Range	Number	
County: Smith SE 1/4				SW4 NW4 SE4	1		5		14	EW	
Distance and direction from nearest town or city street address of well if located within city?  Junction of Highway 9 and 7th St., Gaylord, KS											
2 WATER WELL OWNER: Dave Felsburg											
<b></b>		t. Address, Bo te, ZIP Code	(deceased X #: Gaylord,	KS 67638 .Board of Agriculture, Division of Water Resources Application Number:							
3	,	WELL'S LOC		4 DEPTH OF WELL 32,45 ft.							
	AN "X" IN SECTION BOX:			WELL'S STATIC WATER LEVEL26.10 ft.							
w	NW	/	- NE	WELL WAS USED  1 Domestic 2 Irrigation 3 Feedlot 4 Industrial  Was a chemical / bacte	5 Publi 6 Oil F 7 Dom 8 Air C riological sample	c Water Supply ield Water Supp estic (Lawn & G onditioning submitted to De	oly arden) epartment? Yes	9 Dewaterin Monitorin 11 Injection V 12 Other	g Well MV Well	1	
		S		If yes, mo/day/yr sample was submitted							
5 TYPE OF BLANK CASING USED:											
1 Steel 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (Specify below) 2 PVC 4 ABS 6 Asbestos-Cement 8 Concrete Tile  Blank casing diameter2 in. Was casing pulled? Yes											
CDOLIT BLUC MATERIAL 1 Next compat 2 Compat grout 2 Postenito 4 Other											
Grout Plug Intervals: From3 ft. to32::45 ft., From ft. to ft., From ft.											
What is the nearest source of possible contamination:											
1 Septic tank 2 Sewer lines				<ul><li>6 Seepage pit</li><li>7 Pit privy</li></ul>		40 Fadilines de seus			16 Other (specify below)		
<ul><li>3 Watertight sewer lines</li><li>4 Lateral lines</li></ul>				8 Sewage lagoon 9 Feedyard	13 Inse	13 Insecticide storage 14 Abandoned water well					
5 Cess pool				10 Livestock pens		well/Gas well	voii			ļ	
Direction from well? How many feet?											
	FROM	то	PL	UGGING MATERIALS							
	0 3 native soil		native soil							ĺ	
	3	32.45	bentonite								
CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year)											
IN											
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.