		WATER WELL PLUGGING RE	CORD Form WWC-5P	KSA 82a-1212 ID N	0	
1	LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number	
Cou	inty: Rawlins	WWANE MANE MASE	6	5	<i>3</i> 3 €	
Distance and direction from nearest town or city street address of well if located within city?						
water well owner: John Rogers						
	RR #, St. Address, Box #: R+1 Box (45 Board of Agriculture, Division of Water Resources Application Number:					
3	MATERIAL VIELEO ESSATISTICIA					
	AN "X" IN SECTION BOX: WELL'S STATIC WATER LEVEL 164 ft.					
		WELL WAS USED AS:	<u>.</u>			
	NW NE	Q _{Domestic}	5 Public Water Supply			
		2 Irrigation 3 Feedlot	6 Oil Field Water Supp7 Domestic (Lawn & G			
W	X E	4 Industrial	8 Air Conditioning			
	SW SE Was a chemical / bacteriological sample submitted to Department? Yes					
	If yes, mo/day/yr sample was submitted					
L	S	Water Well Disinfected: Yes	No			
TYPE OF BLANK CASING USED:						
	5 TYPE OF BLANK CASING USED. Steel 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (Specify below)					
2 PVC 4 ABS 6 Asbestos-Cement 8 Concrete Tile						
Blank casing diameter .5						
6	B •	leat cement OCement grout	Bentonite 4 C	Other		
	Grout Plug Intervals: From 155 to 135 ft., From 22 ft. to 5 ft., From to ft. With Court Cap.					
	Septic tank	6 Seepage pit	11 Fuel storage	,		
	2 Sewer lines	7 Pit privy	12 Fertilizer storage	Tree	ity below)	
	3 Watertight sewer lines4 Lateral lines	8 Sewage lagoon9 Feedyard	13 Insecticide storage14 Abandoned water v	vell Wind bro	aK	
	5 Cess pool	10 Livestock pens	15 Oil well/Gas well			
Direction from well?						
FROM TO PLUGGING MATERIALS						
17		d Sand				
15.	5 135 Bentoni	k		RECEIV	ren	
13	5 22 C/2V,			RECEIV		
à		with (iment Gra	of lap	DEC 21	2009	
5	0 Compaci	4d Clay+7opso	<i>i</i> / '	BUREAU OF	WATER	
				BUILLOU	VV/ () = 1 (
7 CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on and this record is true to the best of my knowledge and belief. Kappas						
(mo/day/year)						
by (signature)						
J. /m~~						
INSTRUCTIONS: Use typewriter or ball point pen. <u>Please press firmly</u> and <u>print</u> 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.						