			WATER WELL PLUGGING R	ECORD Form WWC-5P	KSA 82a-1212 ID N	10
1 LOCATION OF WATER WELL:			Fraction	Section Number	Township Number	Range Number
 County: Pottawatomie			NE ₁₄ SW ₁₄ NE ₁₄	19	06	12 _{E/W}
			city street address of well if loc	ated within city?		39° 19.350N
11,060'	West of	Hwy 63 Hav	ensville Rd. Inter	section, Havensvi	11e, KS 66432	096° 17.929W
2 WATE	R WELL OWN		watomie County Kan	as		
	St. Address, Bo ate, ZIP Code	v #·	. 1st. St. oreland, KS 66549	Board of Agriculture Application Number	e, Division of Water Resource:	ces
1 1	WELL'S LOC		'	50 ° ft.		
AN A	" IN SECTION N	BUX:	WELL'S STATIC WATE	R LEVEL8 ft.		
			WELL WAS USED AS:			
N	w ———	— NE ———	① Domestic	5 Public Water Supply		
		x	2 Irrigation 3 Feedlot	6 Oil Field Water Supp7 Domestic (Lawn & G		
W		E	4 Industrial	8 Air Conditioning		
SW SE Was a chemical / bacteriological sample submitted to Department? Yes						NoX
	S		Water Well Disinfected: Ye	esX No		
5 TYPE OF BLANK CASING USED:						
1 Ste 2 PV	C 4 ABS	6 Asl	ought 7 Fibergla bestos-Cement 8 Concre		elow)	
Blank Casin	casing diamete g height above	er6 ¹¹ or below land su	Was casing pulled?	Yes <u>X</u> No	If yes, how mu	ıch4.?
6 GROL	JT PLUG MATE		eat cement 2 Cement gro	ut 3 Bentonite 4 C	Other	
-	Plug Intervals:	From $\frac{1}{2}$	•5 7 ft. to4 1 ft.	, Fromft. to	ft., From	to f
What is the nearest source of possible contamination:						
Septic tank Sewer lines			6 Seepage pit7 Pit privy	11 Fuel storage12 Fertilizer storage	(16) Other (specify below) Farm field	
3 Watertight sewer lines			8 Sewage lagoon	13 Insecticide storage		
4 Lateral lines5 Cess pool			9 Feedyard10 Livestock pens	14 Abandoned water v15 Oil well/Gas well	well	
	·	N	·	feet?2.1		
FROM TO PLUGGING MATERIALS						
50 3	46'	Clean fi				
46 7	48.5	Sodium B	entonite to Mushro	om cap		
48.5	+1	Clean so	il			
7 CONT	RACTOR'S	OF LANDOWNE	ER'S CERTIFICATION: This	water well was plugged	under my jurisdiction a	and was completed on
├── (mo/da	ay/year)0	5/06/2009		and this record is true	e to the best of my knowle	edge and belief. Kansas
Water Well Contractor's License No						
by (signature) Scott Schwing R.S. County Sanitarian						
	IONS: Use ty	pewriter or ball	point pen. Please press fir	mly and <u>print</u> clearly. Plea	se fill in blanks, underlin	e or circle the correct
			sas Department of Health a 367. Telephone: 785/296-55			