WATER WELL PLUGGING RI	ECORD Form WWC	-5P KSA 82a-12	12 ID NO. 🗀		
1 LOCATION OF WATER WELL: County: The Major	Fraction NW 45F 45F 14	Section Number	Township Number	Range Number	
County: The mass NW 1/4 SE 1/4					
2 WATER WELL OWNER: RR#, St. Address, Box #: 2930 County Road 27 City, State ZIP Code: Com, KS (27734)		Global Positioning Systems (decimal degrees, min. of 4 digits Latitude:			
RR#, St. Address, Box #: 2930 County Rodd 27		Longitude:Elevation:			
City, State ZIP Code: Cerm, KS G7734		Datum: Data Collection Method:			
3 MARK WELL'S LOCATION WITH AN "X" IN SECTION	4 DEPTH OF WELL 3 t.				
BOX:	WELL'S STATIC WA	WELL'S STATIC WATER LEVEL $\frac{\partial^{Q}}{\partial Q}$ ft			
NW NE	WELL WAS USED AS	WELL WAS USED AS:			
	Domestic 2 Irrigation	5 Public Water Supply6 Oil Field Water Supply9 Dewatering10 Monitoring			
W SE E	3 Feedlot 4 Industrial	11.7			
SW SE	Was a chemical/bacteriological sample submitted to Department? YesNo X				
5 TYPE OF BLANK CASING USED: Osteel 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 in. Was casing pulled? Yes X No If yes, how much 5 Casing height above or below land surface 60 in.					
6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout Bentonite 4 Other					
Grout Plug Intervals: From 35 ft. to 4 ft., From ft. to ft., From to ft. What is the nearest source of possible contamination:					
What is the nearest source of possible contamination:					
1 Septic tank 6 Seepage pit 11 Fuel Storage 16 Other (specify below) 2 Sewer lines 7 Pit privy 12 Fertilizer storage 3 Watertight sewer lines 8 Sewage lagoon 13 Insecticide storage					
4 Lateral lines 9 Feedyard 14 Abandoned water well Direction from well? 5 Cess pool 15 Oil well/Gas well How many feet?					
pas-	ture			TTDYALG	
31 25 Wish	ed Sand	FROM TO	PLUGGING MA	TERIALS	
25 4 Binto	oniter Octed Clay + Tops	oil	n ann an a		
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 8 3 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4					
Well Contractor's License No. 463. This Water Well Record was completed on (no/day/year) 923-10 under the business name of Rrenn Pumpt Supply 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 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. Visit us at http://www.kdheks.gov/geo/waterwells.