13 17	ATER WELL PLUGGING I	RECORD Form WW	C-5P	KSA 82:	a-1212 ID NO.		
1	LOCATION OF WATER WELL:	Fraction		Number	Township Number	Range Number	
	County: Thomas Street/Rural Address of Well Location;		Global Po	sitioning S	vstems (GPS) inform	ation:	
	direction from nearest town or intersect	Latitude: (in decimal degrees)					
	check here 2844 Ci	Longitude:(in decimal degrees) Elevation:					
	Ryan Stai	Datum: WGS84, NAD83, NAD27 Collection Method:					
	·			GPS unit (Make/Model:			
2	WATER WELL OWNER: RR#, St. Address, Box #:	Digital Map/Photo, Topographic Map, Land Survey					
	City, State ZIP Code:			3 m, □3-5 m, □			
3	MARK WELL'S LOCATION 4 DEPTH OF WELL ft.						
	BOX: WELL'S STATIC WATER LEVELft						
	WELL WAS USED AS:						
	NW NE Domestic Public Water Supply Dewatering						
	Irrigation Oil Field Water Supply Monitoring						
V	W — E Feedlot Domestic (Lawn & Garden) Injection Well						
	SW SE Industrial Air Conditioning Deficiency Other						
	Was a chemical/bacteriological sample submitted to Department? Yes No						
5	S 5 TYPE OF BLANK CASING USED:						
	Steel RMP (SR) Wrought Fiberglass Other (Specify below) PVC ABS Concrete Tile						
	Blank casing diameter 5 in. Was casing pulled? Yes No I If yes, how much 444 Casing height above or below land surface 444 in.						
6	6 GROUT PLUG MATERIAL: Neat cement Cement grout Bentonite Other						
	Grout Plug Intervals: From O ft. to 1 ft., From ft. to ft., From ft. to ft. What is the nearest source of possible contamination: Septic tank Seepage pit Fuel storage Other (specify below)						
	Sewer lines Pit privy Fertilizer storage						
	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?						
]	DI II	CONCLATERIALS	FROM	то	PLUGGING	MATERIALS	
		GGING MATERIALS	2	bottom	Dirt	WINTERCORES	
	0 2 Co	mac_		24 1041	1010		
1			<u> </u>				
7	7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was						
co	completed on (mo/day/year) 11/10/13 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No This Water Well Record was completed on mo/day/year 12/08/13 under the						
W	ell Contractor's License No siness name of	This water well	by (s	ignature)	Regar Still		
1 —	INSTRUCTIONS: Use typewriter or ballpoint pen. Please press firmly and print clearly. Please fill in blanks, underline or circle the						
IN	STRUCTIONS: Use typewriter or	ballpoint pen. Please press fi	rmly and pr	int clearly.	Please fill in blanks, Bureau of Water Geo	underline or circle the logy Section, 1000 SW	
CO	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: 785/296-5524. Send one to Water Well Owner and retain one for your						
records. Visit us at http://www.kdheks.gov/waterwell/index.html.							