		WATER WELL PLUGGING RE	CORD Form WWC-5P	KSA 82a-1212 ID N	10.TH4-06
1	LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
 Cou	nty: M. tchell	UEY VE 14 SE14	35	6	9 E/10
Λ	WATER WELL OWNER: CITY 6	city street address of well if loca 1e <u>East and</u> f Glen Elder market Box55	Imile South Board of Agriculture	, Division of Water Resour	
3	City, State, ZIP Code : Y P N  MARK WELL'S LOCATION WITH	Elder KS 67446  4 DEPTH OF WELL	Application Number	:	
	AN "X" IN SECTION BOX: N	WELL'S STATIC WATER	R LEVEL/4/ ft.		
w	NW NE X	WELL WAS USED AS:  1 Domestic 2 Irrigation 3 Feedlot 4 Industrial	5 Public Water Supply 6 Oil Field Water Supp 7 Domestic (Lawn & G 8 Air Conditioning	arden) 11 Injection 12 Other	ng Well Well
	SW SE SE	Was a chemical / bacteriological sample submitted to Department? Yes			
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 diameter in. Casing height above or below land s	Was casing pulled?	Yes No	If yes, how mu	uch
6	GROUT PLUG MATERIAL: 1 N	leat cement 2 Cement grou	t 3 Bentonite 4 C	other Benjenite 1	
	What is the nearest source of possible contamination:				
	<ol> <li>Septic tank</li> <li>Sewer lines</li> <li>Watertight sewer lines</li> <li>Lateral lines</li> <li>Cess pool</li> </ol>	6 Seepage pit 7 Pit privy 12 Fertilizer storage 8 Sewage lagoon 9 Feedyard 10 Livestock pens 11 Fuel storage 12 Fertilizer storage 13 Insecticide storage 14 Abandoned water well 15 Oil well/Gas well		16 Other (spe	ecify below) ∴ KnowN
	Direction from well?	How many	feet?	······································	
F	FROM TO PI	LUGGING MATERIALS			
7	CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 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) under the business name of by (signature)				
an	STRUCTIONS: Use typewriter or baswers. Send top three copies to Kan, Ste. 420, Topeka, Kansas 66612-1	l point pen. <u>Please press firr</u> sas Department of Health ar	nly and <u>print</u> clearly. Pleand Environment, Bureau	se fill in blanks, underling of Water, Geology Section	ne or circle the correct on, 1000 SW Jackson