			WATER V	VELL PLUGGING R	ECORD	Form WWC-5P	KSA 82a	-1212 ID N	10.002	77330	
1 LOCATION OF WATER WELL:			Fraction	1	Section Number		Township Number		Range Number		
County: GRAHAM			NE 14 H	W4 MW4NE		Z 3		8		- EØ	
Distance and	direction from	nearest town or	city street a	address of well if loc		•					
				TREET		RLAND					
2 WATER	R WELL OWN	ER: CITIZ	EN S	TATZ BA	NK						
RR #, Sta	t. Address, Bo te, ZIP Code	*#: 111 WE MORL	AND	LS 107105	O Ap	ard of Agriculture plication Numbe		Water Resour	ces		
	WELL'S LOCA		1 '	PTH OF WELL							
— AN "X"	IN SECTION N	BOX:	WE	ELL'S STATIC WATE	R LEVEL .	19,10 ft.					
	*		WE	ELL WAS USED AS:							
NW NE				1 Domestic 2 Irrigation		5 Public Water Supply 6 Oil Field Water Supply Monitoring Well Monitoring Well					
w		E		3 Feedlot	7 Don	nestic (Lawn & C Conditioning		11 Injection	i well		
				4 Industrial		•			Y		
sw	<i>-</i>	SE	Was a	chemical / bacteriolo no/day/yr sample w	ogical sample as submitted	e submitted to D	epartment? Y	es	No		
				Well Disinfected: Y							
	S		· vaioi ·	Your Diaminostod.							
5 TYPE	OF BLANK CA	SING USED:									
1 Stee			rought bestos-Ce	7 Fiberg		Other (Specify t					
		er 2 in.		Vas casing pulled?	Yes			If yes, how mi	uch ZZ,4	15	
				vas casing pulled:			•••••	ii yes, now iii	JOH		
6 GROU	T PLUG MATI		leat cemer			entonite 4	Other				
	Plug Intervals:		.3ft		., From .	ft.	to	ft., From	t	to ft	
	s the nearest septic tank	source of possibl		ation: epage pit	11 F:	uel storage		16 Other (sp	ecify below)		
2 Sewer lines			7 Pit	privy	12 F	12 Fertilizer storage					
Watertight sewer lines Lateral lines			9 Fe	wage lagoon edyard	14 A	13 Insecticide storage 14 Abandoned water well					
	ess pool			estock pens		il well/Gas well					
Direct	ion from well?			How man	y feet?						
FROM	то	P	LUGGING	MATERIALS							
0	3	NATIVE	50	11							
3	22,45	RENTON	ITZ	SLUPRY	-						
		70,000					REC	EIVE)		
							oct :	1 3 2006			
							U.i.	1 9 2000			
-						BUREAU OF WATER					
7 CONT	PACTOR'S	OE LANDOWN	IEB'S CEI	RTIFICATION: Th	is water we	ممسام عدس الد	d under my	iurisdiction	and was co	ompleted on	
(mo/d	ay/year)	25-06	77 3 6	RTIFICATION: Th	and	this record is tr	ue to the bes	st of my know	ledge and be	elief. Kansas	
		under t	he busine	ss name of M.I.L.	LO EN	VIROMENT	K SEL	الرام كيارا الرام كيارا	ibleted on (r		
	gnature) .	- D 1 -	7								
				n. <u>Please press fi</u> rtment of Health							
				phone: 785/296-5							