			WATER WELL PLUGGING RI	ECORD Form WWC-5P	KSA 82a-1212 ID I	10.00273990
1	LOCATION OF WATER	WELL:	Fraction	Section Number	Township Number	Range Number
County: SHERMAN			NUE SEU SE 14	22	8	38 €
	tance and direction from nea	arest town or c	ty street address of well if local	ated within city?		
2			S ARGRI SER	VICES		
	RR #, St. Address, Box # City, State, ZIP Code	EDSON	1 KS 67733	Board of Agriculture Application Number	e, Division of Water Resour r:	rces
3	MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF WELL	, Z , Z Z		
٦	N T		WELL WAS USED AS:	H LEVEL		
	NW	NE —	1 Domestic	5 Public Water Supply	9 Dewate	ring .
w	NW	E	2 Irrigation 3 Feedlot 4 Industrial	6 Oil Field Water Supp 7 Domestic (Lawn & G 8 Air Conditioning	oly 10 Monitori Garden) 11 Injection	ing Well Mω-
	SW SE		Was a chemical / bacteriological sample submitted to Department? Yes			
	S		Water Well Disinfected: Ye	es No		
5	TYPE OF BLANK CASII	NG USED:	<u> </u>			
	1 Steel 3 RMP (ought 7 Fibergla			
	Blank casing diameter .	4in.	Was casing pulled?	Yes .X No .	If yes, how m	uch 3 FEET
6	GROUT PLUG MATERI		eat cement 2 Cement gro		Other	
	Grout Plug Intervals:		3ft. to [102,22 ft.	, Fromft. t	o ft., From	to f
	What is the nearest sou 1 Septic tank	irce of possible	contamination: 6 Seepage pit	11 Fuel storage	16 Other (sp	ecify helow)
2 Sewer lines 3 Watertight sewer lines			7 Pit privy 8 Sewage lagoon	12 Fertilizer storage 13 Insecticide storage		
4 Lateral lines 5 Cess pool			9 Feedyard 10 Livestock pens	14 Abandoned water well		
	Direction from well?		•	feet?		
	FROM TO	PI	JGGING MATERIALS			
		SATIVE SCATOLIT	E SLURRY			
	3 1040 B	SC N TOW 1 7	Cupp			
7	CONTRACTOR'S OF	LANDOWNE	R'S CERTIFICATION: This	s water well was plugged	d under my jurisdiction	and was completed on
	Water Well Contractor's l	License No under to	7.3.5 e business name of M.L.	and this record is true	ue to the best of my know ater Well Record was con	npleted on (mo/day/year)
IN			point pen. Please press fir			
		or ball	Paris Paris I loude prode III	with pink ordary, i lot		3. 3. 3. 30 110 0011001

INSTRUCTIONS: Use typewriter or ball point pen. <u>Please press firmly</u> and <u>print</u> 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.