

WATER WELL PLUGGING RECORD

Form WWC-5P

KSA 82a-1212

ID NO.

ASOBW2

1 LOCATION OF WATER WELL: County: Pottawatomie	Fraction NE 1/4 NW 1/4 SW 1/4	Section Number 10	Township Number T 10 S	Range Number 12 <input checked="" type="checkbox"/> E <input type="checkbox"/> W
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Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here

411 Bertrand Ave, St. Mary's, KS 66536

Global Positioning Systems (GPS) information:

Latitude: 39.19347 (in decimal degrees)

Longitude: 96.06898 (in decimal degrees)

Elevation: NA

Horizontal Datum WGS84, NAD83, NAD27

Collection Method:

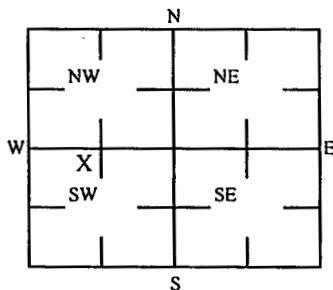
GPS unit (Make/model: _____)

Digital Map/Photo, Topographic Map Land Survey

Est. Accuracy: <3 m, 3-5 m, 5-15 m, >15 m

2 WATER WELL OWNER: Bernies Self Service
RR#, St. Address, Box #: 411 Bertrand Ave
City, State ZIP Code: St. Mary's, KS 66536

3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:



4 DEPTH OF WELL 34.2 ft. ASOBW2

WELL'S STATIC WATER LEVEL NA ft

WELL WAS USED AS:

- Domestic
- Irrigation
- Feedlot
- Industrial

- Public Water Supply
- Oil Field Water Supply
- Domestic (Lawn & Garden)
- Air Conditioning

- Dewatering
- Monitoring
- Injection Well
- Other _____

Was a chemical/bacteriological sample submitted to Department? Yes No

5 TYPE OF BLANK CASING USED:

- Steel
- RMP (SR)
- Wrought
- Fiberglass
- Other (Specific below)
- PVC
- ABS
- Asbestos-Cement
- Concrete Tile

Blank casing diameter 2 in. Was casing pulled? Yes No If yes, how much 2 ft
Casing height above or below land surface NA in.

6 GROUT PLUG MATERIAL: Neat cement Cement grout Bentonite Other Concrete: 0-0.5 ft; Soil: 0.5-3ft

Grout Plug Intervals: From 3 ft to 34.2 ft, From _____ ft to _____ ft, From _____ ft to _____ ft,

What is the nearest source of possible contamination:

- Septic tank
- Sewer lines
- Watertight sewer lines
- Lateral lines
- Cess pool
- Seepage pit
- Pit privy
- Sewage lagoon
- Feed yard
- Livestock pens
- Fuel storage
- Fertilizer storage
- Insecticide storage
- Abandoned water well
- Oil well/Gas well
- Other (specify below) _____

Direction from well? _____
How many feet? _____

FROM	TO	PLUGGING MATERIALS	FROM	TO	PLUGGING MATERIALS
0	0.5	Concrete			
0.5	3.0	Soil			
3	34.2	Bentonite			
KDHE ID: Bernie's Self Service; U4-075-00324					

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 2/6/2019 and this record is true to the best of my knowledge and belief. Kansas Water Contractor's License No. 757. This Water Well Record was completed on (mo/day/year) 2/21/2019 under the business name of Larsen & Associates, Inc. By (signature) _____

Send one white copy to Kansas Department of Health & Environment, Geology Section, 1000 SW Jackson Street, Ste. 420, Topeka, KS 66612-1367. Send one copy to WATER WELL OWNER and retain one for your records
Visit us at <http://www.kdheks.gov/waterwell/index.html> Telephone 785-296-5524.