

Corrected

WATER WELL PLUGGING RECORD

Form WWC-5P

KSA 82a-1212

ID No.

A53

1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: <i>Riley</i>	<i>SE 1/4 NE 1/4 NE 1/4</i>	<i>18</i>	<i>10</i>	<i>8 E</i>

Distance and direction from nearest town or city street address of well if located within city?
720 N 3rd Manhattan, KS

2 WATER WELL OWNER:	Board of Agriculture, Division of Water Resources
RR#, St. Address, Box #	Application Number:
<i>Coastal Mart 9131</i>	
City, State, ZIP Code	
<i>Rt. 130 @ 295</i>	
<i>Westville, NJ</i>	

3 MARK WELL'S LOCATION WITH AN 'X' IN SECTION BOX:	4 DEPTH OF WELL <i>32</i> ft.											
	WELL'S STATIC WATER LEVEL <i>215</i> ft.											
	<p>WELL WAS USED AS:</p> <table border="0"> <tr> <td>1 Domestic</td> <td>5 Public Water Supply</td> <td>9 Dewatering</td> </tr> <tr> <td>2 Irrigation</td> <td>6 Oil Field Water Supply</td> <td><input checked="" type="radio"/> 10 Monitoring Well</td> </tr> <tr> <td>3 Feedlot</td> <td>7 Lawn and Garden (domestic)</td> <td>11 Injection Well</td> </tr> <tr> <td>4 Industrial</td> <td>8 Air Conditioning</td> <td>12 Other</td> </tr> </table>	1 Domestic	5 Public Water Supply	9 Dewatering	2 Irrigation	6 Oil Field Water Supply	<input checked="" type="radio"/> 10 Monitoring Well	3 Feedlot	7 Lawn and Garden (domestic)	11 Injection Well	4 Industrial	8 Air Conditioning
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4 Industrial	8 Air Conditioning	12 Other										
	<p>Was a chemical/bacteriological sample submitted to Department? Yes ___ No ___</p> <p>If yes, mo/day/yr sample was submitted _____</p> <p>Water Well Disinfected: Yes ___ No ___</p>											

5 TYPE OF BLANK CASING USED:

1 Steel	3 RMP (SR)	5 Wrought	7 Fiberglass	9 Other (specify below)
<input checked="" type="radio"/> 2 PVC	4 ABC	6 Asbestos-Cement	8 Concrete Tile	

Blank casing diameter *2* in. Was casing pulled? Yes ___ No If yes, how much _____

Casing height above or below land surface *-36* in.

6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other _____

Grout Plug Intervals From *0* ft. to *32* ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.

What is the nearest source of possible contamination:

1 Septic tank	6 Seepage pit	11 Fuel storage	16 Other (specify below)
2 Sewer lines	7 Pit privy	12 Fertilizer storage	
3 Watertight sewer lines	8 Sewage lagoon	13 Insecticide storage	
4 Lateral lines	9 Feedyard	14 Abandoned water well	
5 Cess Pool	10 Livestock pens	15 Oil well/ Gas well	

Direction from well? _____ How many feet? _____

FROM	TO	CODE	PLUGGING MATERIALS
<i>0</i>	<i>32</i>		<i>Bentonite</i>

RECEIVED

JAN 08 2009

BUREAU OF WATER

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/yr) *8/22/06* and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. *554* This Water Well Record was completed on (mo/day/yr) *10/6/06* under the business name of *Woofler Pump & Well Blue-lem* by (signature) *[Signature]*

INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment, Bureau of Water, 1000 S W Jackson St., Ste. 420, Topeka, Kansas 66620-0001. Telephone: 785-296-3585. Send one to Water Well Owner and retain one for your records.