

Corrected
ID No. **OBS**

WATER WELL PLUGGING RECORD Form WWC-5P KSA 82a-1212

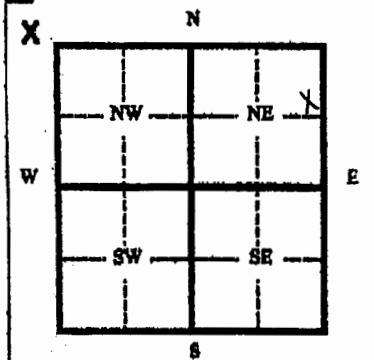
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1 LOCATION OF WATER WELL: Fraction **SE 1/4 NE 1/4 NE 1/4** Section Number **18** Township Number **10** Range Number **8 E**
 County: **Riley**

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: **Coastal Mart 9131** Board of Agriculture, Division of Water Resources
 RR#, St. Address, Box # **Rt 130 @ 295** Application Number:
 City, State, ZIP Code: **Westville, MI**

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



4 DEPTH OF WELL **21** ft.

WELL'S STATIC WATER LEVEL **—** ft.

- WELL WAS USED AS:
- 1 Domestic
 - 2 Irrigation
 - 3 Feedlot
 - 4 Industrial
 - 5 Public Water Supply
 - 6 Oil Field Water Supply
 - 7 Lawn and Garden (domestic)
 - 8 Air Conditioning
 - 9 Dewatering
 - 10 **Monitoring Well**
 - 11 Injection Well
 - 12 Other

Was a chemical/bacteriological sample submitted to Department? Yes No
 If yes, mo/day/yr sample was submitted _____
 Water Well Disinfected: Yes No

5 TYPE OF BLANK CASING USED:
 1 Steel 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (specify below)
 2 **PVC** 4 ABC 6 Asbestos-Cement 8 Concrete Tile
 Blank casing diameter **2** in. Was casing pulled? Yes No if yes, how much **Overdrilled to 20'**
 Casing height above or below land surface _____ in.

6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 **Bentonite** 4 Other _____
 Grout Plug Intervals From **0** ft. to **21** ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.

- What is the nearest source of possible contamination:
- 1 Septic tank
 - 2 Sewer lines
 - 3 Watertight sewer lines
 - 4 Lateral lines
 - 5 Cess Pool
 - 6 Seepage pit
 - 7 Pit privy
 - 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 (specify below) _____

Direction from well? _____ How many feet? _____

FROM	TO	CODE	PLUGGING MATERIALS
0	21		Bentonite

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-ken** 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: 785-296-3565. Send one to Water Well Owner and retain one for your records.