

Cancelled

WATER WELL PLUGGING RECORD

Form WWC-5P

KSA 82a-1212

ID No.

PMW-2

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?
7.20 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>24</i> ft.
	WELL'S STATIC WATER LEVEL <i>21.5</i> ft.
	WELL WAS USED AS: 1 Domestic 5 Public Water Supply 9 Dewatering 2 Irrigation 6 Oil Field Water Supply 10 Monitoring Well 3 Feedlot 7 Lawn and Garden (domestic) 11 Injection Well 4 Industrial 8 Air Conditioning 12 Other
Was a chemical/bacteriological sample submitted to Department? Yes ___ No ___ If yes, no/day/yr sample was submitted _____ Water Well Disinfected: Yes ___ No ___	

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

6 GROUT PLUG MATERIAL:	1 Neat cement	2 Cement grout	3 <input checked="" type="checkbox"/> Bentonite	4 Other _____
Grout Plug Intervals	From <i>0</i> ft. to <i>24</i> 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>24</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) <i>8/21/06</i> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <i>554</i> This Water Well Record was completed on (mo/day/yr) <i>10/6/06</i> under the business name of <i>Woofler Pump & Well / Blue-ken</i> by (signature) <i>[Signature]</i>		
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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: 785-298-3585. Send one to Water Well Owner and retain one for your records.