

WATER WELL PLUGGING RECORD

Form WWC-5P

KSA 82a-1212

ID No.

SVE-1

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number																																				
County: <u>Riley</u>		<u>SE 1/4 NE 1/4 NE 1/4</u>	<u>18</u>	<u>10</u>	<u>8 E</u>																																				
Distance and direction from nearest town or city street address of well if located within city? <u>720 N 3rd Manhattan, KS</u>																																									
2 WATER WELL OWNER:		Board of Agriculture, Division of Water Resources																																							
RR#, St. Address, Box #		Application Number:																																							
City, State, ZIP Code																																									
3 MARK WELL'S LOCATION WITH AN 'X' IN SECTION BOX:		4 DEPTH OF WELL <u>20.8</u> ft.																																							
<div style="text-align: center;"> </div>		WELL'S STATIC WATER LEVEL <u>—</u> ft.																																							
		WELL WAS USED AS:																																							
		<table style="width:100%;"> <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>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	10 Monitoring Well	3 Feedlot	7 Lawn and Garden (domestic)	11 Injection Well	4 Industrial	8 Air Conditioning	12 Other																								
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Was a chemical/bacteriological sample submitted to Department? Yes <u>—</u> No <u>—</u> If yes, mo/day/yr sample was submitted <u>—</u> Water Well Disinfected: Yes <u>—</u> No <u>—</u>																																									
5 TYPE OF BLANK CASING USED:																																									
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Blank casing diameter <u>4</u> in. Was casing pulled? Yes <u>X</u> No <u>—</u> If yes, how much <u>Overdrilled to 20'</u>																																									
Casing height above or below land surface <u>—</u> in.																																									
6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other <u>—</u>																																									
Grout Plug Intervals From <u>0</u> ft. to <u>20.8</u> ft. From <u>—</u> ft. to <u>—</u> ft. From <u>—</u> ft. to <u>—</u> ft.																																									
What is the nearest source of possible contamination:																																									
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Direction from well? <u>—</u> How many feet? <u>—</u>																																									
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7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/yr) <u>8/22/06</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>554</u> This Water Well Record was completed on (mo/day/yr) <u>10/6/06</u> under the business name of <u>Woolter Pump & Well Blue-ken</u> by (signature) <u>[Signature]</u>																																									
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.																																									

RECEIVED

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BUREAU OF WATER