WATER WELL PLUGGING RECORD FORM WWC-5P KSA 82a-1212 ID NO.									
1 L	OCATION County:	OF WATE	R WELL: Frac	etion /4 NE	4	Number 9	Township Number T 11 S	Range Number 15 🔀 E 🔲 W	
Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here Approximately 2 miles north of Topeka WATER WELL OWNER: RR#, St. Address, Box #: City, State ZIP Code: Consolidated RWD #4 3333 NW Button Rd. Topeka, KS 66675					Global Positioning Systems (GPS) information: Latitude: 39.105311 (in decimal degrees) Longitude: -95.749835 (in decimal degrees) Elevation: Unknown Datum: WGS84, NAD83, NAD27 Collection Method: WAAS ☐ Digital Map/Photo, ☐ Topographic Map, ☐ Land Survey Est. Accuracy: < 3 m, ☐ 3-5 m, ☐ 5-15 m, ☐ > 15 m				
3	MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX: 4 DEPTH OF WELL 25 ft. WELL'S STATIC WATER LEVEL 9.5 ft								
	WELL WAS USED A NWNE W				S: □ Public Water Supply □ Dewatering □ Oil Field Water Supply □ Monitoring □ Domestic (Lawn & Garden) □ Injection Well □ Air Conditioning □ Other Windmill iological sample submitted to Department? Yes □ No □				
5	5 TYPE OF BLANK CASING USED:								
6	6 GROUT PLUG MATERIAL: Neat cement Cement grout Bentonite Other								
	Grout Plug Intervals: From ft. to ft., From ft. to ft., From ft.								
	What is the nearest source of possible contamination: Septic tank Seepage pit Fuel Storage Fertilizer storage Watertight sewer lines Sewage lagoon Lateral lines Feedyard Other (specify below) None known Insecticide storage Abandoned water well Direction from well? How many feet?								
	FROM	TO	PLUGGING	G MATERIALS	FROM	TO	PLUGGING	MATERIALS	
	25	4	Bentonite Hole				12000110		
	4	0	Compacted Sc						
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) o6-24-09 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No 185 This Water Well Record was completed on (mo/day/year) 06-29-09 under the business name of Clarke Well & Equipment, Inc by (signature) 10-29-09 under the clarke Well & Equipment, Inc by (signature) 10-29-09 under the clarke Well & Equipment, Inc by (signature) 10-29-09 under the clarke Well & Equipment, Inc by (signature) 10-29-09 under the clarke Well & Equipment, Inc by (signature) 10-29-09 under the clarke Well & Equipment, Inc by (signature)									
INSTRUCTIONS: Use typewriter or ballpoint pen. Please press firmly and print clearly. Please fill in blanks, underline or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Ste. 420, Topeka, Kansas 66612-1367. Telephone: 785/296-5524. Send one to Water Well Owner and retain one for your records. Visit us at http://www.kdheks.gov/waterwell/l~ndex.html .									
Check one: White Copy Blue Copy Pink Copy									