

**WATER WELL PLUGGING RECORD Form WWC-5P**

KSA 82a-1212

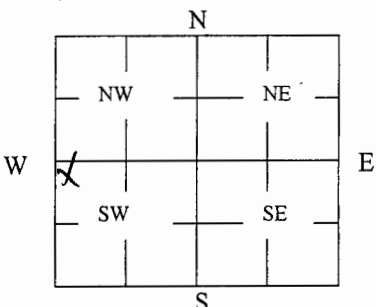
ID NO.

MW-6

<b>1 LOCATION OF WATER WELL:</b> Wyandotte County	Fraction NW ¼ NW ¼ SW ¼	Section Number 4	Township Number 11 S	Range Number R 25 E
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Distance and direction from nearest town or city street address of well if located within city?  
**301 N. Main**


<b>2 WATER WELL OWNER:</b> Pete's Service Inc. RR#, St. Address, Box #: 20261 State Ave. City, State ZIP Code: Kansas City, KS 66086	<b>Global Positioning Systems</b> (decimal degrees, min. of 4 digits) Latitude: _____ Longitude: _____ Elevation: _____ Datum: _____ Data Collection Method: _____
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<b>3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:</b> 	<b>4 DEPTH OF WELL</b> <u>28.30</u> ft.  WELL'S STATIC WATER LEVEL <u>10.35</u> ft  WELL WAS USED AS:  <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="checkbox"/> 10 Monitoring</td> </tr> <tr> <td>3 Feedlot</td> <td>7 Domestic (Lawn &amp; Garden)</td> <td>11 Injection Well</td> </tr> <tr> <td>4 Industrial</td> <td>8 Air Conditioning</td> <td>12 Other _____</td> </tr> </table> Was a chemical/bacteriological sample submitted to Department? Yes ___ No <u>x</u> ___	1 Domestic	5 Public Water Supply	9 Dewatering	2 Irrigation	6 Oil Field Water Supply	<input checked="" type="checkbox"/> 10 Monitoring	3 Feedlot	7 Domestic (Lawn & Garden)	11 Injection Well	4 Industrial	8 Air Conditioning	12 Other _____
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<b>5 TYPE OF BLANK CASING USED:</b> <table border="0"> <tr> <td>1 Steel</td> <td>3 RMP (SR)</td> <td>5 Wrought</td> <td>7 Fiberglass</td> <td>9 Other (Specify below) _____</td> </tr> <tr> <td><input checked="" type="checkbox"/> 2 PVC</td> <td>4 ABS</td> <td>6 Asbestos-Cement</td> <td>8 Concrete Tile</td> <td></td> </tr> </table> Blank casing diameter <u>2</u> in. Was casing pulled? Yes <u>X</u> No ___ If yes, how much <u>3</u> ft. _____ Casing height above or below land surface _____ in.	1 Steel	3 RMP (SR)	5 Wrought	7 Fiberglass	9 Other (Specify below) _____	<input checked="" type="checkbox"/> 2 PVC	4 ABS	6 Asbestos-Cement	8 Concrete Tile	
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<b>6 GROUT PLUG MATERIAL:</b> 1 Neat cement      2 Cement grout      3 Bentonite      4 Other <u>Soil</u> _____																				
Grout Plug Intervals:    4 From <u>.5</u> ft. to <u>3</u> ft.,    3 From <u>3</u> ft. to <u>28.30</u> ft.,    From _____ to _____ ft.																				
What is the nearest source of possible contamination: <table border="0"> <tr> <td>1 Septic tank</td> <td>6 Seepage pit</td> <td>11 Fuel Storage</td> <td><input checked="" type="checkbox"/> 16 Other (specify below) _____</td> </tr> <tr> <td>2 Sewer lines</td> <td>7 Pit privy</td> <td>12 Fertilizer storage</td> <td>_____ Contaminated Site _____</td> </tr> <tr> <td>3 Watertight sewer lines</td> <td>8 Sewage lagoon</td> <td>13 Insecticide storage</td> <td></td> </tr> <tr> <td>4 Lateral lines</td> <td>9 Feedyard</td> <td>14 Abandoned water well</td> <td>Direction from well? _____</td> </tr> <tr> <td>5 Cess pool</td> <td>10 Livestock pens</td> <td>15 Oil well/Gas well</td> <td>How many feet? _____</td> </tr> </table>	1 Septic tank	6 Seepage pit	11 Fuel Storage	<input checked="" type="checkbox"/> 16 Other (specify below) _____	2 Sewer lines	7 Pit privy	12 Fertilizer storage	_____ Contaminated Site _____	3 Watertight sewer lines	8 Sewage lagoon	13 Insecticide storage		4 Lateral lines	9 Feedyard	14 Abandoned water well	Direction from well? _____	5 Cess pool	10 Livestock pens	15 Oil well/Gas well	How many feet? _____
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FROM	TO	PLUGGING MATERIALS	FROM	TO	PLUGGING MATERIALS
0'	.5'	Concrete			
.5'	3'	Soil			
3'	28.30'	Bentonite Chips			

**7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:** This water well was plugged under my jurisdiction and was completed on (mo/day/year) 2/11/2010 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 585. This Water Well Record was completed on (mo/day/year) 2/12/2010 under the business name of Associated Environmental, 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: 785/296-5522. Send one to Water Well Owner and retain one for your records. Visit us at <http://www.kdheks.gov/waterwell/index.html>.