WATER WELL PLUGGING RECORD Form WWC-5P KSA 82a-1212 ID NO. LOCATION OF WATER WELL: Fraction Section Number County: Shawkee WW/4 WE/4 WE/4

Distance and direction from nearest town or city street address of well if located within city? Township Number Range Number WATER WELL OWNER: KWIKSLOP IN Global Positioning Systems (decimal degrees, min. of 4 digits RR#, St. Address, Box #: **POBOX** 1927 Longitude: -95, 709 Elevation: 933.22 City, State ZIP Code: HUTChinson 165 Datum: Data Collection Method: Su Ruey MARK WELL'S LOCATION WITH AN "X" IN SECTION WELL'S STATIC WATER LEVEL DRY **BOX**: WELL WAS USED AS: 1 Domestic 5 Public Water Supply 9 Dewatering 2 Irrigation 6 Oil Field Water Supply 10 Monitoring W 3 Feedlot 7 Domestic (Lawn & Garden) 11 Injection Well 4 Industrial 8 Air Conditioning 12 Other\_\_ SWWas a chemical/bacteriological sample submitted to Department? Yes\_\_\_\_\_ No TYPE OF BLANK CASING USED: 3 RMP (SR) 5 Wrought 7 Fiberglass 1 Steel 9 Other (Specify below) 2 PVC - 4 ABS 6 Asbestos-Cement 8 Concrete Tile Blank casing diameter \_\_\_\_\_ in. Was casing pulled? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, how much \_\_\_\_ Casing height above or below land surface \_\_\_\_\_ in. 2 Cement grout **GROUT PLUG MATERIAL:** 1 Neat cement 3 Bentonite 4 Other \_\_\_\_\_ From **10** ft. to **2** ft.. Grout Plug Intervals: From ft. From to ft. 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 Direction from well? 4 Lateral lines 9 Feedyard 14 Abandoned water well 5 Cess pool 10 Livestock pens 15 Oil well/Gas well PLUGGING MATERIALS FROM FROM TO PLUGGING MATERIALS 2 BENTONITE Chips 7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) and this record is true to the best of my knowledge and belief! Kansas Water Well Contractor's License No. This Water Well Record was completed on (mo/day/year) under the business name of Tan K Management Services (signature) INSTRUCTIONS: Use typewriter or ballpoint pen. Please press firmly and print clearly. Please fill in blanks, underline or circle the

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/geo/waterwells.