

**WATER WELL PLUGGING RECORD Form WWC-5P** KSA 82a-1212 ID NO. NMW3D

|  |  |                             |                                  |  |
|--|--|-----------------------------|----------------------------------|--|
| <b>1 LOCATION OF WATER WELL:</b><br>County: <b>Shawnee</b> | Fraction<br><b>SE ¼ NE ¼ SE ¼ NE ¼</b> | Section Number<br><b>36</b> | Township Number<br><b>T 12 S</b> | Range Number<br><b>R 15</b> <input checked="" type="checkbox"/> E <input type="checkbox"/> W |
|--|--|-----------------------------|----------------------------------|--|

|   |  |
|---|--|
| Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here <input type="checkbox"/> <b>416 SW 57th Street, Topeka, KS</b> | <b>Global Positioning Systems (GPS) information:</b><br>Latitude: <u>N 38.96660</u> (in decimal degrees)<br>Longitude: <u>W 95.68852</u> (in decimal degrees)<br>Elevation: <u>TOC: 1016.41; RIM: 1016.60</u><br>Horizontal Datum: <input checked="" type="checkbox"/> WGS84, <input type="checkbox"/> NAD83, <input type="checkbox"/> NAD27<br>Collection Method: _____ |
|---|--|

|  |  |
|--|--|
| <b>2 WATER WELL OWNER:</b> Lindemuth, Inc. (Pauline Farm RR#, St. Address, Box #: <b>125 SW Gage Blvd</b> City, State ZIP Code: <b>Topeka, KS 66606-2029</b> | <input type="checkbox"/> GPS unit (Make/Model: _____)<br><input type="checkbox"/> Digital Map/Photo, <input type="checkbox"/> Topographic Map, <input checked="" type="checkbox"/> Land Survey<br>Est. Accuracy: <input checked="" type="checkbox"/> < 3 m, <input type="checkbox"/> 3-5 m, <input type="checkbox"/> 5-15 m, <input type="checkbox"/> > 15 m |
|--|--|

|  |   |  |    |   |    |  |    |  |  |                                   |  |                                     |                                     |   |  |                                  |   |   |                                     |   |                                      |
|--|---|--|----|---|----|--|----|--|--|-----------------------------------|--|-------------------------------------|-------------------------------------|---|--|----------------------------------|---|---|-------------------------------------|---|--------------------------------------|
| <b>3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:</b><br><div style="text-align: center;">                 N<br/> <table border="1" style="margin: auto; border-collapse: collapse;"> <tr><td style="width: 20px;">NW</td><td style="width: 20px;"></td><td style="width: 20px;">NE</td><td style="width: 20px;">X</td></tr> <tr><td style="width: 20px;">SW</td><td style="width: 20px;"></td><td style="width: 20px;">SE</td><td style="width: 20px;"></td></tr> </table>                 W <span style="margin-left: 100px;">E</span><br/>                 S             </div> | NW  |  | NE | X | SW |  | SE |  | <b>4 DEPTH OF WELL</b> <u>10.91</u> <b>ft.</b><br>WELL'S STATIC WATER LEVEL <u>1.60</u> <b>ft</b><br>WELL WAS USED AS:<br><table style="width: 100%;"> <tr> <td><input type="checkbox"/> Domestic</td> <td><input type="checkbox"/> Public Water Supply</td> <td><input type="checkbox"/> Dewatering</td> </tr> <tr> <td><input type="checkbox"/> Irrigation</td> <td><input type="checkbox"/> Oil Field Water Supply</td> <td><input checked="" type="checkbox"/> Monitoring</td> </tr> <tr> <td><input type="checkbox"/> Feedlot</td> <td><input type="checkbox"/> Domestic (Lawn &amp; Garden)</td> <td><input type="checkbox"/> Injection Well</td> </tr> <tr> <td><input type="checkbox"/> Industrial</td> <td><input type="checkbox"/> Air Conditioning</td> <td><input type="checkbox"/> Other _____</td> </tr> </table> Was a chemical/bacteriological sample submitted to Department? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> | <input type="checkbox"/> Domestic | <input type="checkbox"/> Public Water Supply | <input type="checkbox"/> Dewatering | <input type="checkbox"/> Irrigation | <input type="checkbox"/> Oil Field Water Supply | <input checked="" type="checkbox"/> Monitoring | <input type="checkbox"/> Feedlot | <input type="checkbox"/> Domestic (Lawn & Garden) | <input type="checkbox"/> Injection Well | <input type="checkbox"/> Industrial | <input type="checkbox"/> Air Conditioning | <input type="checkbox"/> Other _____ |
| NW   |   | NE   | X  |   |    |  |    |  |  |                                   |  |                                     |                                     |   |  |                                  |   |   |                                     |   |                                      |
| SW   |   | SE   |    |   |    |  |    |  |  |                                   |  |                                     |                                     |   |  |                                  |   |   |                                     |   |                                      |
| <input type="checkbox"/> Domestic  | <input type="checkbox"/> Public Water Supply      | <input type="checkbox"/> Dewatering            |    |   |    |  |    |  |  |                                   |  |                                     |                                     |   |  |                                  |   |   |                                     |   |                                      |
| <input type="checkbox"/> Irrigation  | <input type="checkbox"/> Oil Field Water Supply   | <input checked="" type="checkbox"/> Monitoring |    |   |    |  |    |  |  |                                   |  |                                     |                                     |   |  |                                  |   |   |                                     |   |                                      |
| <input type="checkbox"/> Feedlot   | <input type="checkbox"/> Domestic (Lawn & Garden) | <input type="checkbox"/> Injection Well        |    |   |    |  |    |  |  |                                   |  |                                     |                                     |   |  |                                  |   |   |                                     |   |                                      |
| <input type="checkbox"/> Industrial  | <input type="checkbox"/> Air Conditioning         | <input type="checkbox"/> Other _____           |    |   |    |  |    |  |  |                                   |  |                                     |                                     |   |  |                                  |   |   |                                     |   |                                      |

**5 TYPE OF BLANK CASING USED:**

|   |                                   |  |  |  |
|---|-----------------------------------|--|--|--|
| <input type="checkbox"/> Steel          | <input type="checkbox"/> RMP (SR) | <input type="checkbox"/> Wrought         | <input type="checkbox"/> Fiberglass    | <input type="checkbox"/> Other (Specify below) _____ |
| <input checked="" type="checkbox"/> PVC | <input type="checkbox"/> ABS      | <input type="checkbox"/> Asbestos-Cement | <input type="checkbox"/> Concrete Tile |  |

Blank casing diameter 2 in. Was casing pulled? Yes  No  If yes, how much 10.91 ft  
 Casing height above or below land surface .19 ft in.

**6 GROUT PLUG MATERIAL:**  Neat cement  Cement grout  Bentonite  Other \_\_\_\_\_

Grout Plug Intervals: From 10.91 ft. to 0 ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

What is the nearest source of possible contamination:

|   |   |  |  |
|---|---|--|--|
| <input type="checkbox"/> Septic tank            | <input type="checkbox"/> Seepage pit    | <input checked="" type="checkbox"/> Fuel storage       | <input type="checkbox"/> Other (specify below) _____ |
| <input type="checkbox"/> Sewer lines            | <input type="checkbox"/> Pit privy      | <input checked="" type="checkbox"/> Fertilizer storage |  |
| <input type="checkbox"/> Watertight sewer lines | <input type="checkbox"/> Sewage lagoon  | <input type="checkbox"/> Insecticide storage           |  |
| <input type="checkbox"/> Lateral lines          | <input type="checkbox"/> Feedyard       | <input type="checkbox"/> Abandoned water well          | Direction from well? _____                           |
| <input type="checkbox"/> Cess pool              | <input type="checkbox"/> Livestock pens | <input type="checkbox"/> Oil well/Gas well             | How many feet? _____                                 |

| FROM | TO    | PLUGGING MATERIALS | FROM | TO | PLUGGING MATERIALS |
|------|-------|--------------------|------|----|--------------------|
| 0    | .5    | Topsoil/Grass seed |      |    |                    |
| .5   | 10.91 | Neat Cement        |      |    |                    |
|      |       |                    |      |    |                    |
|      |       |                    |      |    |                    |
|      |       |                    |      |    |                    |
|      |       |                    |      |    |                    |

**7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:** This water well was plugged under my jurisdiction and was completed on (mo/day/year) 4/24/2023 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. PG294. This Water Well Record was completed on (mo/day/year) 6/7/2023 under the business name of ppB enviro-solutions by (signature) *[Signature]*