WATER WELL PLUGGING RECORD Form WWC-5P KSA 82a-1212 ID NO.				
1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: Douglas	1/4 SE 1/4 NE 1/4 NE 1/4	II.	T 12 S	20 ⊠ E □W
Street/Rural Address of Well Location; direction from nearest town or intersect check here Approximately 0.5 miles east of L	Global Positioning Systems (GPS) information: Latitude: 38.983396 (in decimal degrees) Longitude: -95.205466 (in decimal degrees) Elevation: Unknown Datum: WGS84, NAD83, NAD27			
2 WATER WELL OWNER: ICL Performance Products RR#, St. Address, Box #: 440 N. 9th St. City, State ZIP Code: Lawrence, KS 66044		Collection Method: ☐ GPS unit (Make/Model: 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: N 4 DEPTH OF WELL 57.85 ft. WELL'S STATIC WATER LEVEL 21 ft				
WELL WAS USED AS: Domestic				
5 TYPE OF BLANK CASING USED:				
Steel RMP (SR) Wrought Fiberglass Other (Specify below) PVC ABS Concrete Tile Blank casing diameter 4 in. Was casing pulled? Yes No If yes, how much Casing height above or below land surface. 36 in.				
6 GROUT PLUG MATERIAL: Neat cement Cement grout Bentonite Other Grout Plug Intervals: From 3 ft. to 23 ft., From ft. to ft., From to 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 Direction from well? How many feet?				
FROM TO PL	UGGING MATERIALS	FROM TO	PLUGGING	MATERIALS
0 3 Compa				
	ite Chips			
23 57.85 Chlorin	ated Sand		.	
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 07/13/15 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) 07/15/15 under the business name of 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 .				