

WATER WELL PLUGGING RECORD Form WWC-5P

KSA 82a-1212

ID NO.

MW-WR1

1 LOCATION OF WATER WELL: Fraction NE 1/4 Section Number 8 Township Number T 12 S Range Number 25 E W
 County: Johnson

Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here 6201 Johnson drive, Mission, KS 66202

Global Positioning Systems (GPS) information:

Latitude: 39.02104 (in decimal degrees)
 Longitude: 94.65752 (in decimal degrees)

Elevation: _____
 Datum: WGS84, NAD83, NAD27

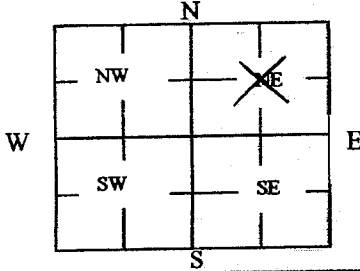
Collection Method:

GPS unit (Make/Model: Garmin GPS 12)
 Digital Map/Photo, Topographic Map, Land Survey

Est. Accuracy: < 3 m, 3-5 m, 5-15 m, > 15 m

2 WATER WELL OWNER: Waddell & Reed
 RR#, St. Address, Box #: 6300 Lamar Avenue
 City, State ZIP Code: Shawnee Mission, KS 66201

3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:



4 DEPTH OF WELL 23.5 ft.

WELL'S STATIC WATER LEVEL 10.75 ft

WELL WAS USED AS:

- Domestic
- Irrigation
- Feedlot
- Industrial
- Public Water Supply
- Oil Field Water Supply
- Domestic (Lawn & Garden)
- Air Conditioning
- Dewatering
- Monitoring
- Injection Well
- Other _____

Was a chemical/bacteriological sample submitted to Department? Yes No

5 TYPE OF BLANK CASING USED:

- Steel
- RMP (SR)
- Wrought
- Fiberglass
- PVC
- ABS
- Asbestos-Cement
- Concrete Tile
- Other (Specify below) _____

Blank casing diameter 2.0 in. Was casing pulled? Yes No If yes, how much All
 Casing height above or below land surface N/A in.

6 GROUT PLUG MATERIAL: Neat cement Cement grout Bentonite Other _____

Grout Plug Intervals: From 1.0 ft. to 23.5 ft., From _____ ft. to _____ ft., From _____ to _____ ft.

What is the nearest source of possible contamination:

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

FROM	TO	PLUGGING MATERIALS	FROM	TO	PLUGGING MATERIALS
0	1.0'	Topsoil			
1.0'	23.5'	3/8 Bentonite Chips - Hydrated			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 05/18/2015 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 606. This Water Well Record was completed on (mo/day/year) 08/11/2015 under the business name of PSA Environmental Services 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/index.html>.

Check one: White Copy Blue Copy Pink Copy