MW-8

WATER WELL PLUGGING RECORD

Form WWC-5P

KSA 828-1212 ID NO. CO 132358

1	Loc	ATION OF W	ATER WELL:	Fraction	Section	Number	Township N	umber Range	Number
County: Dickinson SE" NW" NW"				SE4 NW4 NW4	32		12	1	EW
D (7	Distance and direction from nearest town or city street address of well if located within city?								
2	302 E. 4th St Chapman, KS 2 WATER WELL OWNER: Home Oil Company								
-	RR #, St. Address, Box #: Rt. 1 Box 4 Board of Agriculture, Division of Water Resources								
	City, State, 219 Code : Chapman KS 67431 Application Number:								
3	3 MARK WELL'S LOCATION WITH 4 DEPTH OF WELL								
WELL'S STATIC WATER LEVEL 25 ft.									
	×			WELL WAS USED AS:					
	N	iw-	NE	1 Domestic 2 Irrigation	6 Oil Fiel	Water Supply d Water Supp	ily 🐠	Dewatering Monitoring Well	
w	·		E	3 Feedlot 4 Industrial	7 Domes 8 Air Cor	tic (Lawn & G iditioning		njection Well Other	
	Was a chemical / bacteriological sample submitted to Department? Yes								
	If yes, mo/day/yr sample was submitted								
-	Water Well Disinfected: Yes NoX								
5 TYPE OF BLANK CASING USED:									
1 Steel 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (Specify below) 2 PVC 4 ABS 6 Asbestos-Cement 8 Concrete Tile									
Blank casing diameter									
-	Casing height above or below land surfacein.								
GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other									
What is the nearest source of possible contamination:									
1 Septic tank2 Sewer lines				6 Seepage pit 7 Pit privy	12 Fertili	11 Fuel storage 16 Other (specify below) 12 Fertilizer storage			
3 Watertight sewer I4 Lateral lines			ver lines	8 Sewage lagoon 9 Feedyard	14 Aban	ticide storage doned water v	vell		
5 Cess pool 10 Livestock pens 15 Oil well/Gas well								·	
Direction from well?									
			PL	UGGING MATERIALS					
0 3 Native v			Native	material					
2	<u>}</u>	30'	Bentonita	= chips					
								·	
7	CONTR	RACTOR'S	OF LANDOWNE	R'S CERTIFICATION: This	water well w	as plugged	under my iurisdi	ction and was co	ompleted on
CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year)									
	.4. ? by (sia	18 - 10 nature) . Ge	under the	business name of Green	aField C	ontracto	>r.S.		

INSTRUCTIONS: Use typewriter or ball point 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 Toneka. Kansas 66612-1367. Telephone: 785/296-5522. Send one to Water Well Owner and retain one for your records.