

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

<b>1 LOCATION OF WATER WELL:</b> County: <u>Geary</u>	Fraction <u>1/4 SE 1/4 SE 1/4 SE 1/4</u>	Section Number <u>23</u>	Township Number <u>T 12 S</u>	Range Number <u>4</u> <input checked="" type="checkbox"/> E <input type="checkbox"/> W
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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"/>  Approximately 3 miles south and 6 miles west of Junction City.	<b>Global Positioning Systems (GPS) information:</b> Latitude: <u>38.987041</u> (in decimal degrees) Longitude: <u>-96.944968</u> (in decimal degrees) Elevation: <u>Unknown</u> Datum: <input type="checkbox"/> WGS84, <input checked="" type="checkbox"/> NAD83, <input type="checkbox"/> NAD27 Collection Method: <input checked="" type="checkbox"/> GPS unit (Make/Model: <u>WAAS</u> ) <input type="checkbox"/> Digital Map/Photo, <input type="checkbox"/> Topographic Map, <input type="checkbox"/> Land Survey Est. Accuracy: <input type="checkbox"/> < 3 m, <input checked="" type="checkbox"/> 3-5 m, <input type="checkbox"/> 5-15 m, <input type="checkbox"/> > 15 m
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<b>3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:</b>  <div style="text-align: center;">                 N  <table border="1" style="margin: auto; border-collapse: collapse;"> <tr> <td style="padding: 5px;">--NW--</td> <td style="padding: 5px;">--NE--</td> </tr> <tr> <td style="padding: 5px;">--SW--</td> <td style="padding: 5px;">--SE--</td> </tr> </table>                 W <span style="margin-left: 100px;">E</span>                  S             </div>	--NW--	--NE--	--SW--	--SE--	<b>4 DEPTH OF WELL</b> <u>53.60</u> ft. WELL'S STATIC WATER LEVEL <u>23.50</u> ft. WELL WAS USED AS: <input type="checkbox"/> Domestic <input type="checkbox"/> Public Water Supply <input type="checkbox"/> Dewatering <input checked="" type="checkbox"/> Irrigation <input type="checkbox"/> Oil Field Water Supply <input 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 _____  Was a chemical/bacteriological sample submitted to Department? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
--NW--	--NE--				
--SW--	--SE--				

**5 TYPE OF BLANK CASING USED:**

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

Blank casing diameter 16 in. Was casing pulled? Yes  No  If yes, how much \_\_\_\_\_

Casing height above or below land surface. 8 in.

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

Grout Plug Intervals: From 0.75 ft. to 23.50 ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft., From \_\_\_\_\_ to \_\_\_\_\_ ft.

What is the nearest source of possible contamination:

<input type="checkbox"/> Septic tank	<input type="checkbox"/> Seepage pit	<input type="checkbox"/> Fuel Storage	<input checked="" type="checkbox"/> Other (specify below) _____
<input type="checkbox"/> Sewer lines	<input type="checkbox"/> Pit privy	<input type="checkbox"/> Fertilizer storage	<u>None Known</u>
<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	0.75	Concrete			
0.75	23.50	Bentonite Chips			
23.50	53.60	Chlorinated Sand			

**7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:** This water well was plugged under my jurisdiction and was completed on (mo/day/year) 05/29/13 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) 06/03/13 under the business name of Clarke Well & Equipment, Inc. by (signature) [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>.