

WATER WELL PLUGGING RECORD Form WWC-5P

KSA 82a-1212

ID NO.

MW7

1 LOCATION OF WATER WELL: County: MORRIS	Fraction SW 1/4 NE 1/4 NW 1/4 NW 1/4	Section Number 35	Township Number T 14 S	Range Number 6 <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 ☒

Global Positioning Systems (GPS) information:
 Latitude: 38.79584 (in decimal degrees)
 Longitude: 96.73938 (in decimal degrees)
 Elevation: 1466.07
 Horizontal Datum: ☐ WGS84, ☒ NAD83, ☐ NAD27
 Collection Method:

2 WATER WELL OWNER: AGRI TRAILS COOP RR#, St. Address, Box #: 312 MACKENZIE ST. City, State ZIP Code: WHITE CITY, KS 66872	<input type="checkbox"/> GPS unit (Make/Model: _____) <input type="checkbox"/> Digital Map/Photo, <input type="checkbox"/> Topographic Map, <input checked="" type="checkbox"/> Land Survey 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
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3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:

N			
X			
NW			NE
W			E
SW			SE
S			

4 DEPTH OF WELL 114.32 ft.
WELL'S STATIC WATER LEVEL 83.49 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
☒ PVC

☐ RMP (SR)
☐ ABS

☐ Wrought
☐ Asbestos-Cement

☐ Fiberglass
☐ Concrete Tile

☐ Other (Specify below) _____

Blank casing diameter 4 in. Was casing pulled? Yes ☒ No ☐ If yes, how much 3'

Casing height above or below land surface 36 in.

6 GROUT PLUG MATERIAL: ☐ Neat cement ☐ Cement grout ☒ Bentonite ☒ Other GRAVEL 0-0.5

Grout Plug Intervals: From 0.5 ft. to 114.32 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.

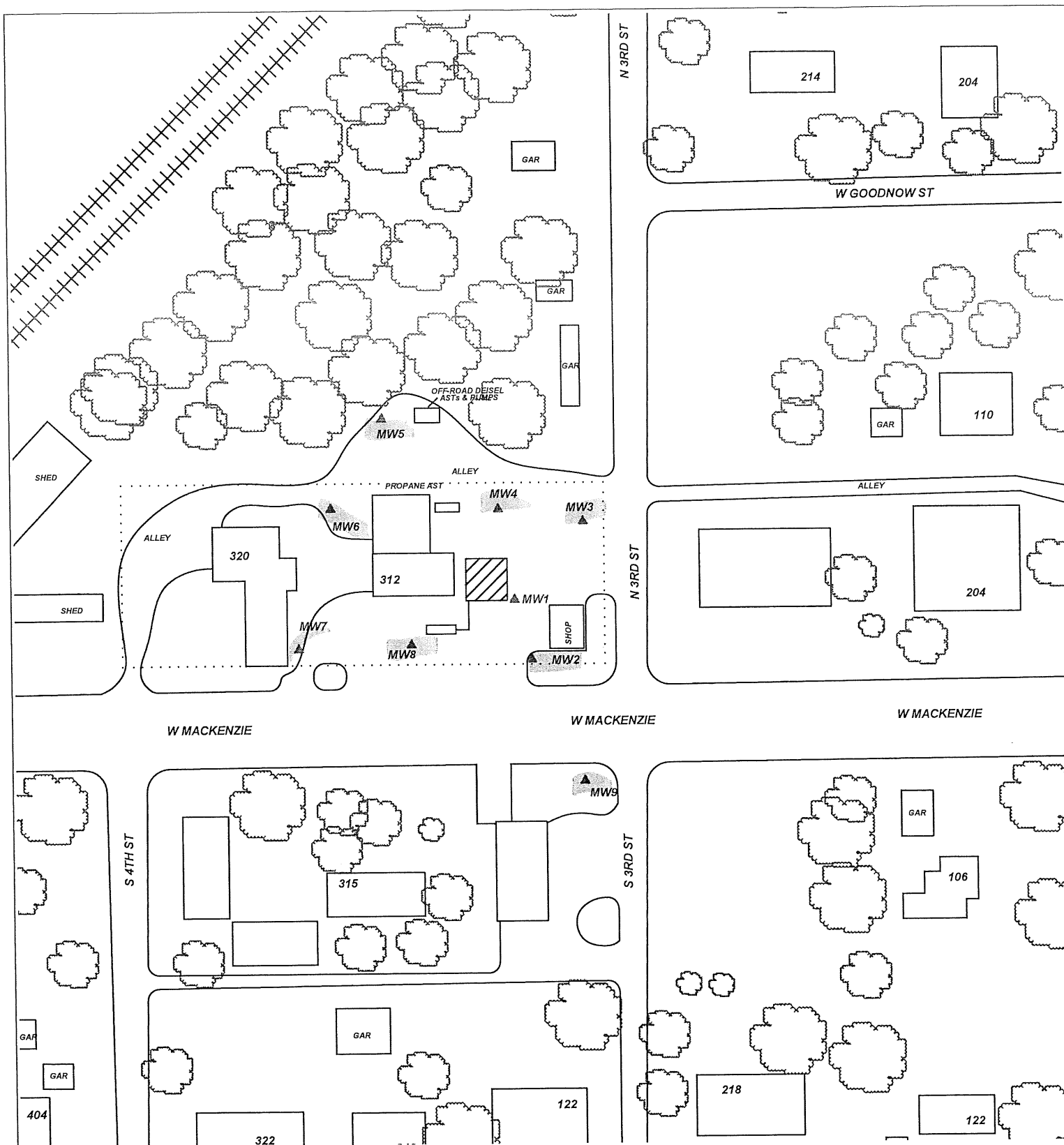
What is the nearest source of possible contamination:

<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 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	0.5	GRAVEL			
0.5	114.32	BENTONITE			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 5/15/23 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 585. This Water Well Record was completed on (mo/day/year) 5/25/23 under the business name of ASSOCIATED ENVIRONMENTAL INC. by (signature) *[Signature]*

Send one white copy to Kansas Department of Health & Environment, Geology Section, 1000 SW Jackson Street, Ste. 420, Topeka, KS 66612-1367. Send one copy to WATER WELL OWNER and retain one for your records.
 Visit us at <http://www.kdheks.gov/waterwell/index.html> Telephone 785-296-5524.



PROJECT: **AGRI TRAILS COOP - WHITE CITY**

ADDRESS: **312 MACKENZIE ST.**

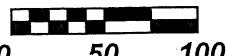
LOCATION: **WHITE CITY, KS**

DRAWN BY: **B. STALNAKER** DATE: **5/27/20**

REVISED BY: **B. STALNAKER** DATE: **5/25/23**

AEI JOB #: **TF528** KDHE JOB #: **U5-064-15220**

SCALE: **1" = 100'**



NOTES:

TITLE:



**ASSOCIATED
ENVIRONMENTAL
INC.**

LEGEND:

- = ACTIVE PUMP ISLAND/BASIN
- = MONITORING WELL
- = PLUGGED/DESTROYED WELL

..... = SUBJECT PROPERTY

