

# PLUGGING REPORT

USE TYPEWRITER OR BALL  
POINT PEN-PRESS FIRMLY,  
PRINT CLEARLY.

WATER WELL RECORD  
KSA 82a-1201-1215

Kansas Department of Health and  
Environment-Division of Environment  
(Water well Contractors)  
Topeka, Kansas 66620

1. Location of well:		County <b>Coffey</b>	Fraction <b>NE 1/4 NW 1/4 SW 1/4</b>	Section number <b>8</b>	Township number <b>T 21 S</b>	Range number <b>R 16 E</b>
2. Distance and direction from nearest town or city: <b>3 E 1 1/2 S of NEW STRAWN</b> Street address of well location if in city:				3. Owner of well: <b>KGE, RUPP</b> R.R. or street: City, state, zip code: <b>WOLF CREEK GEN PLANT</b>		
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. <b>3</b> in. Completion date <b>1/5/78</b> Well depth <b>37</b> ft.		
				7. <input type="checkbox"/> Cable tool <input checked="" type="checkbox"/> Rotary <input type="checkbox"/> Driven <input type="checkbox"/> Dug <input type="checkbox"/> Hollow rod <input type="checkbox"/> Jetted <input type="checkbox"/> Bored <input type="checkbox"/> Reverse rotary		
				8. Use: <input type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry <input type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input type="checkbox"/> Stock <input type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input checked="" type="checkbox"/> Other <b>#19</b>		
				9. Casing: Material <b>N/A</b> Height: Above or below <b>6</b> in. Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <b>6</b> in. RMP <input type="checkbox"/> PVC <input type="checkbox"/> Weight <input type="checkbox"/> lbs./ft. Dia. <b>3</b> in. to <b>37</b> ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. <input type="checkbox"/>		
5. Type and color of material				From	To	10. Screen: Manufacturer's name <b>N/A</b>
<b>CWP-1</b>						Type <input type="checkbox"/> Dia. <input type="checkbox"/>
<b>3" HOLE DRILLED TO 37'</b>						Slot/gauze <input type="checkbox"/> Length <input type="checkbox"/>
<b>ALL MATERIALS REMOVED FROM THE</b>						Set between <input type="checkbox"/> ft. and <input type="checkbox"/> ft.
<b>HOLE INCLUDING CASING</b>						<input type="checkbox"/> ft. and <input type="checkbox"/> ft.
<b>1/2" PIPE EXTENDED TO 36'</b>						Gravel pack? <input type="checkbox"/> Size range of material <input type="checkbox"/>
<b>GROUT PUMPED TO SURFACE</b>						11. Static water level: <b>N/A</b> mo./day/yr.
						<input type="checkbox"/> ft. below land surface Date <input type="checkbox"/>
						12. Pumping level below land surfaces:
						<input type="checkbox"/> ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m.
						<input type="checkbox"/> ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m.
						Estimated maximum yield <input type="checkbox"/> g.p.m.
						13. Water sample submitted: mo./day/yr.
						<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date <input type="checkbox"/>
						14. Well head completion: <b>AFTER PLUGGING</b>
						<input type="checkbox"/> Pitless adapter <input type="checkbox"/> Inches above grade
						15. Well grouted? <input type="checkbox"/>
						With: <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <b>1:1</b> Concrete
						Depth: From <input type="checkbox"/> ft. to <input type="checkbox"/> ft.
						16. Nearest source of possible contamination: <b>NONE</b>
						ft. <input type="checkbox"/> Direction <input type="checkbox"/> Type <input type="checkbox"/>
						Well disinfected upon completion? <input type="checkbox"/> Yes <input type="checkbox"/> No
						17. Pump: <input checked="" type="checkbox"/> Not installed
						Manufacturer's name <input type="checkbox"/>
						Model number <input type="checkbox"/> HP <input type="checkbox"/> Volts <input type="checkbox"/>
						Length of drop pipe <input type="checkbox"/> ft. capacity <input type="checkbox"/> g.p.m.
						Type:
						<input type="checkbox"/> Submersible <input type="checkbox"/> Turbine
						<input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating
						<input type="checkbox"/> Centrifugal <input type="checkbox"/> Other
18. Elevation:		19. Remarks: <b>PIEZOMETER</b>		20. Water well contractor's certification:		
Topography:		<b>DRILLED IN 18' CUT SECTION</b>		This well was drilled under my jurisdiction and this report		
<input type="checkbox"/> Hill		<b>WILL BE BACKFILLED TO SURFACE</b>		is true to the best of my knowledge and belief.		
<input type="checkbox"/> Slope		<b>AT A LATER DATE</b>		<b>Layne Hester</b> <b>102</b>		
<input type="checkbox"/> Upland				Business name <b>10101 39th. HEN</b>		
<input type="checkbox"/> Valley				Address <b>24th</b>		
				Signed <b>C. Allen</b> Date <b>2/1/78</b>		
				Authorized representative		

Forward the white, blue and pink copies to the Department of Health and Environment

Form WWC-5