

WATER WELL PLUGGING RECORD Form WWC-5P

KSA 82a-1212

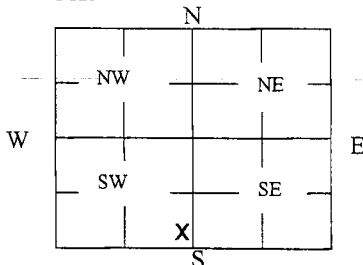
ID NO.

MW22

1 LOCATION OF WATER WELL: County: HARVEY	Fraction SE ¼ SE ¼ SE ¼ SW ¼	Section Number 17	Township Number T 23 S	Range Number 1 <input checked="" type="checkbox"/> E <input type="checkbox"/> W
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"/> 114 W 1ST ST NEWTON KS, 67114		Global Positioning Systems (GPS) information: Latitude: 38.04288 (in decimal degrees) Longitude: 97.34598 (in decimal degrees) Elevation: 1445.80 Horizontal Datum: <input type="checkbox"/> WGS84, <input checked="" type="checkbox"/> NAD83, <input type="checkbox"/> NAD27 Collection Method:		

2 WATER WELL OWNER: KDHE RR#, St. Address, Box #: 1000 SW JACKSON City, State ZIP Code: TOPEKA, KS 66612	<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 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:



4 DEPTH OF WELL 15.02 ft.

WELL'S STATIC WATER LEVEL 7.31 ft

WELL WAS USED AS:

- | | | |
|-------------------------------------|---|--|
| <input type="checkbox"/> Domestic | <input type="checkbox"/> Public Water Supply | <input type="checkbox"/> Dewatering |
| <input type="checkbox"/> Irrigation | <input type="checkbox"/> Oil Field Water Supply | <input checked="" 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 ☐ No ☒

5 TYPE OF BLANK CASING USED:

- | | | | | |
|---|-----------------------------------|--|--|--|
| <input type="checkbox"/> Steel | <input type="checkbox"/> RMP (SR) | <input type="checkbox"/> Wrought | <input type="checkbox"/> Fiberglass | <input type="checkbox"/> Other (Specify below) _____ |
| <input checked="" type="checkbox"/> PVC | <input type="checkbox"/> ABS | <input type="checkbox"/> Asbestos-Cement | <input type="checkbox"/> Concrete Tile | |

Blank casing diameter 2 in. Was casing pulled? Yes ☒ No ☐ If yes, how much 3'
Casing height above or below land surface 0 in.6 GROUT PLUG MATERIAL: ☐ Neat cement ☐ Cement grout ☒ Bentonite ☒ Other SOIL 0-0.5

Grout Plug Intervals: From 0.5 ft. to 15.02 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? SOUTH |
| <input type="checkbox"/> Cess pool | <input type="checkbox"/> Livestock pens | <input type="checkbox"/> Oil well/Gas well | How many feet? 70 |

FROM	TO	PLUGGING MATERIALS	FROM	TO	PLUGGING MATERIALS
0	0.5	SOIL			
0.5	15.02	BENTONITE			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 3/30/22 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) 4/21/21 under the business name of ASSOCIATED ENVIRONMENTAL INC. by (signature) *[Signature]*

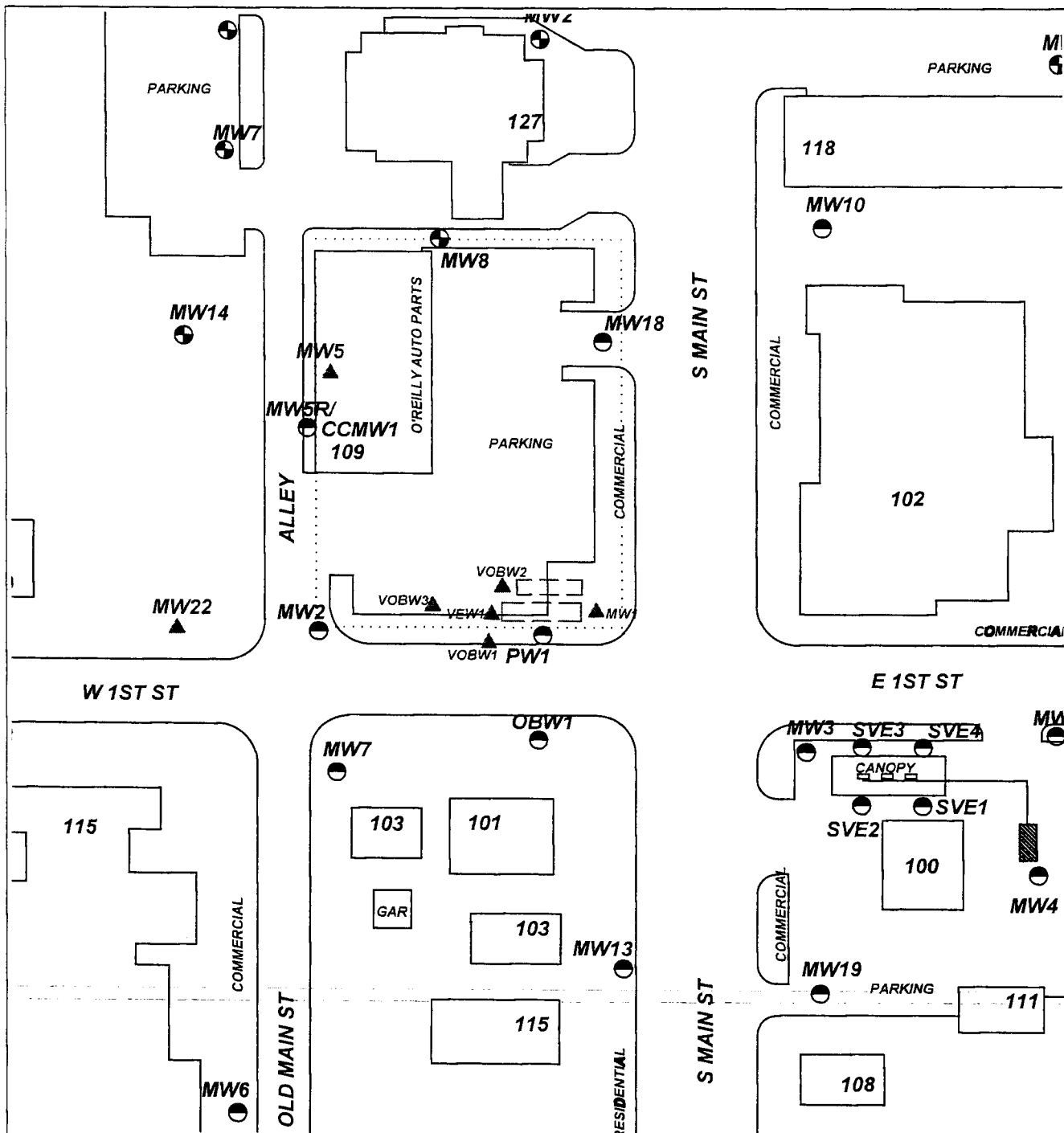
Send one white copy to Kansas Department of Health & Environment, Geology Section, 1000 SW Jackson Street, Ste. 420, Topeka, KS 66612-1367. Send one copy to WATER WELL OWNER and retain one for your records.
Visit us at <http://www.kdheks.gov/waterwell/index.html> Telephone 785-296-5524.








KSA82a-1212

Revised 1/20/2015

Harvey

17-23-1E



PROJECT: THE CORNER		FIGURE 2.3 AREA BASE MAP CLOSE-UP  ASSOCIATED ENVIRONMENTAL INC.	LEGEND:  = FORMER UST BASIN/EXCAVATION  = ACTIVE PUMP ISLANDS/UST(U2-040-00441)  = THE CORNER/PRIME TIME  = FORMER SINCLAIR, NEWTON(U2-040-15031)  = PLUGGED/DESTROYED WELL  = SUBJECT PROPERTY
ADDRESS: 106 W. FIRST ST.			
LOCATION: NEWTON, KS			
DRAWN BY: B. STALNAKER DATE: 10/23/19			
REVISED BY: B. STALNAKER DATE: 4/4/22			
AEC JOB #: TM246 KONE JOB #: U2-040-01078			
SCALE: 1" = 50'		NOTES:	
