

WATER WELL PLUGGING RECORD Form WWC-5P

KSA 82a-1212 ID NO.

MW13

| | | | | |
|--|---------------------------------|----------------------|---------------------------|---|
| 1 LOCATION OF WATER WELL: County: HARVEY | Fraction SE ¼ SW ¼ NW ¼ SW ¼ | Section Number 18 | Township Number T 23 S | Range Number 01 <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

Global Positioning Systems (GPS) information:
 Latitude: 38.04742 (in decimal degrees)
 Longitude: 97.37164 (in decimal degrees)
 Elevation: 1441.72
 Horizontal Datum: WGS84, NAD83, NAD27
 Collection Method:

2 WATER WELL OWNER: SOUTHWEST WELLS wheels
 RR#, St. Address, Box #: 420 N. MERIDIAN BDA
 City, State ZIP Code: NEWTON, KS 67114

GPS unit (Make/Model: _____)
 Digital Map/Photo, Topographic Map, Land Survey
 Est. Accuracy: < 3 m, 3-5 m, 5-15 m, > 15 m

3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:

| | | | |
|---|------|----|---|
| | N | | |
| | NW | NE | |
| W | X SW | SE | E |
| | S | | |

4 DEPTH OF WELL 20.39 ft.
 WELL'S STATIC WATER LEVEL 20.18 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 checked="" 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^{BDA} 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 CONCRETE 0-0.5

Grout Plug Intervals: From 0.5 ft. to 20.39 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.

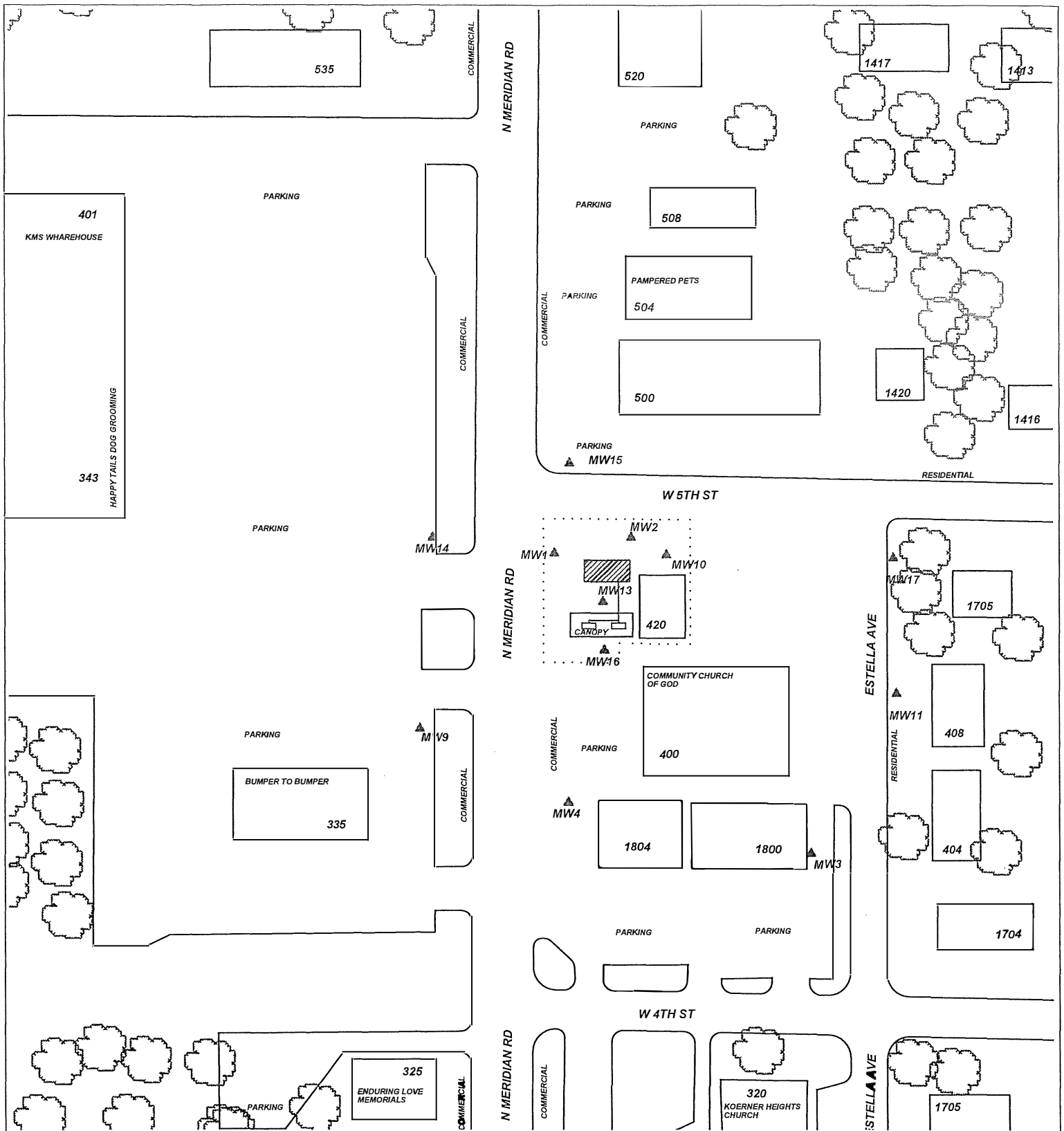
What is the nearest source of possible contamination:

| | | | |
|---|---|--|--|
| <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 | CONCRETE | | | |
| 0.5 | 20.39 | BENTONITE | | | |
| | | | | | |
| | | | | | |
| | | | | | |

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 5/17/23 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) 6/1/23 under the business name of ASSOCIATED ENVIRONMENTAL INC. by (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: **SOUTHWEST WHEELS**

ADDRESS: **420 N. MERIDIAN**

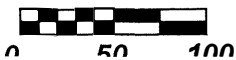
LOCATION: **NEWTON, KS**

DRAWN BY: **B. STALNAKER** DATE: **2/8/21**

REVISED BY: **B. STALNAKER** DATE: **6/1/23**

AEI JOB #: **TF532** KDHE JOB #: **U2-040-15039**

SCALE: **1" = 100'**



NOTES: **Sampling date 8/22/22**

TITLE:



ASSOCIATED ENVIRONMENTAL INC.

LEGEND:

= FORMER UST BASIN/EXCAVATION PUMP ISLANDS

= MONITORING WELL

= PLUGGED/DESTROYED WELL

..... = SUBJECT PROPERTY

T. 23 R. 1E Sec. 18
Harvey County

