

WATER WELL PLUGGING RECORD Form WWC-5P

KSA 82a-1212 ID NO.

MW11

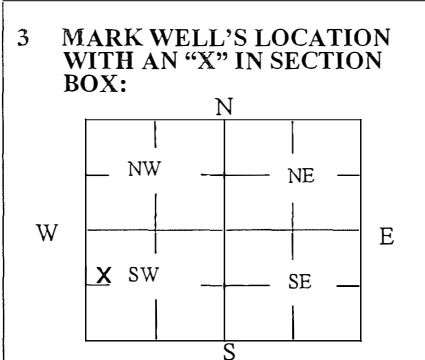
1 LOCATION OF WATER WELL: County: HARVEY	Fraction SE ¼ SW ¼ NW ¼ SW ¼	Section Number 18	Township Number T 23 S	Range Number 01 <input checked="" type="checkbox"/> E <input type="checkbox"/> W
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Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here

Global Positioning Systems (GPS) information:
 Latitude: 38.04713 (in decimal degrees)
 Longitude: 97.37095 (in decimal degrees)
 Elevation: 1439.55
 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



4 DEPTH OF WELL 20.14 ft.
 WELL'S STATIC WATER LEVEL DRY 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 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 TOPSOIL 0-0.5

Grout Plug Intervals: From 0.5 ft. to 20.14 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.

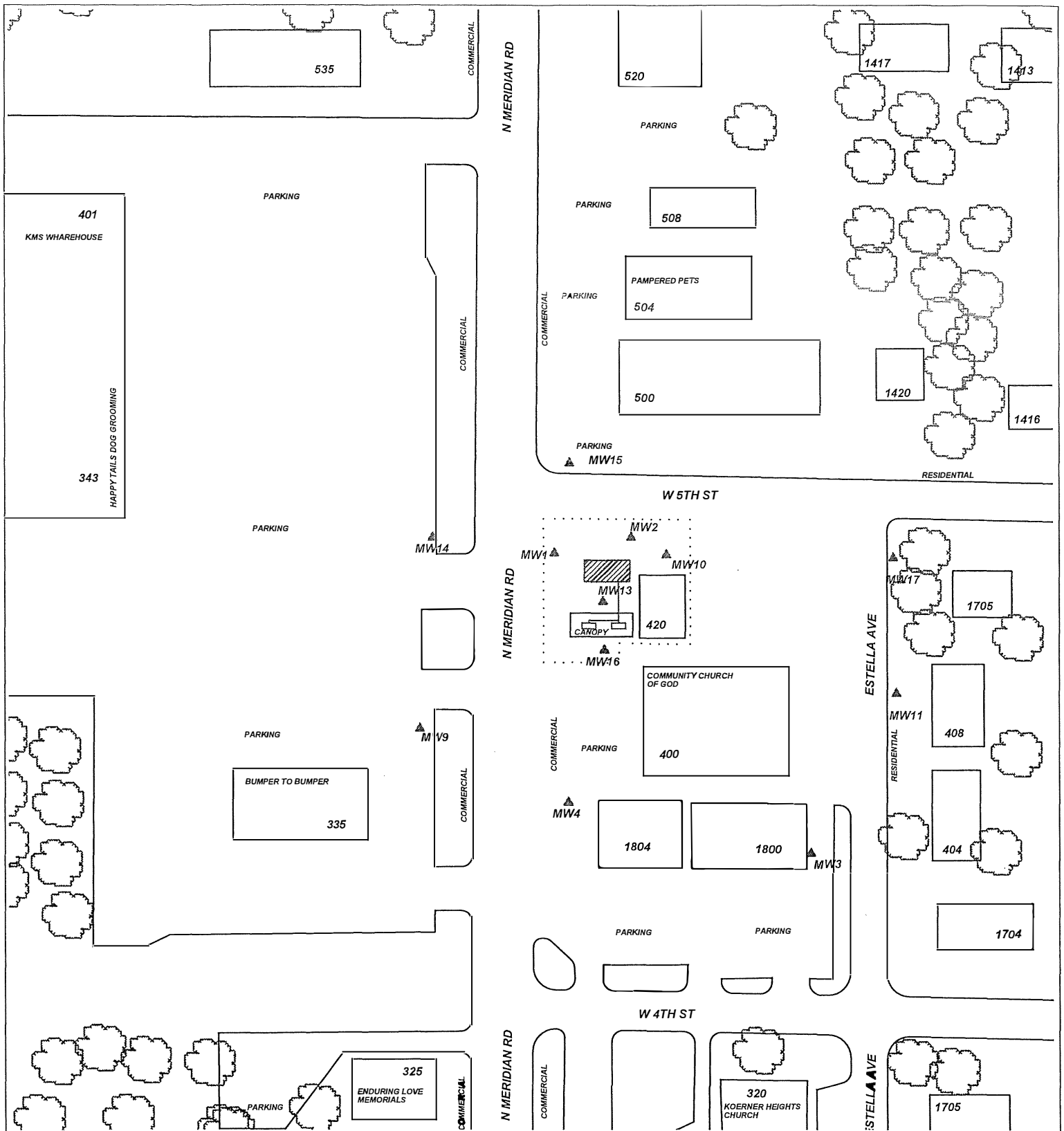
What is the nearest source of possible contamination:

<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	TOPSOIL			
0.5	20.14	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**

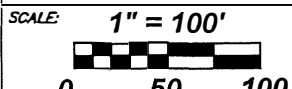
ADDRESS: **420 N. MERIDIAN**

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**



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

