

WATER WELL PLUGGING RECORD

Form WWC-5P

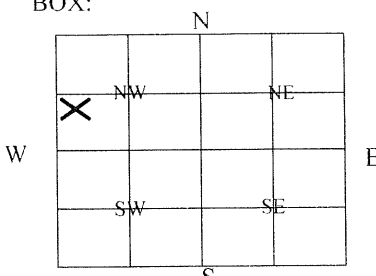
KSA 82a-1212

ID NO.

1 LOCATION OF WATER WELL: County: Sedgwick	Fraction NW 1/4 NW 1/4 SW 1/4 NW 1/4	Section Number 17	Township Number T 26 S	Range Number 1 <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 <input checked="" type="checkbox"/>	Global Positioning Systems (GPS) information: Latitude: 37.79223 (in decimal degrees) Longitude: -97.35371 (in decimal degrees) Elevation: _____ Horizontal Datum: <input checked="" type="checkbox"/> WGS84, <input type="checkbox"/> NAD83, <input type="checkbox"/> NAD27 Collection Method: <input checked="" type="checkbox"/> GPS unit (Make/Model: iPHONE) <input type="checkbox"/> Digital Map/Photo. <input type="checkbox"/> Topographic Map. <input 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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2 WATER WELL OWNER: Daniel L. Graham RR#, St. Address, Box #: 5944 N. Seneca St. City, State ZIP Code: Wichita KS 67204	GPS unit (Make/Model): iPHONE <input type="checkbox"/> Digital Map/Photo. <input type="checkbox"/> Topographic Map. <input 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 25 ft. WELL'S STATIC WATER LEVEL 6 ft. WELL WAS USED AS: <input checked="" 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 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 <input type="checkbox"/> No <input checked="" type="checkbox"/>
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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 **5** in. Was casing pulled? Yes No If yes, how much _____
 Casing height above or below land surface **36** in.

6 GROUT PLUG MATERIAL: Neat cement Cement grout Bentonite Other _____

Grout Plug Intervals: From **3** ft. to **25** ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.

What is the nearest source of possible contamination:

<input checked="" type="checkbox"/> Septic tank	<input type="checkbox"/> Seepage pit	<input 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? East
<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	3	compacted topsoil			
3	25	bentonite			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) **7/11/2023** and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License **236**. This Water Well Record was completed on (mo/day/year) **7/11/2023** under the business name of **Harp Well & Pump Service** by (signature) **Todd Harp**

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.