

WATER WELL PLUGGING RECORD Form WWC-5P

KSA 82a-1212 ID NO.

1 LOCATION OF WATER WELL: County: <u>Bourbon</u>	Fraction <u>SE</u> $\frac{1}{4}$ $\frac{1}{4}$ $\frac{1}{4}$	Section Number <u>3</u>	Township Number <u>27</u>	Range Number <u>23</u> <u>EW</u>
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Distance and direction from nearest town or city street address of well if located within city?

600' west of 127th Terr. at house number 426

#3

2 WATER WELL OWNER: Phyllis PlasterRR#, St. Address, Box #: 426 127th Terr.City, State ZIP Code: Ex. Scott KS 66701

Global Positioning Systems (decimal degrees, min. of 4 digits)

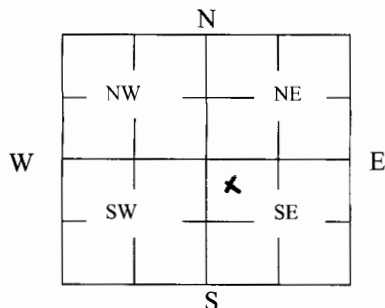
Latitude: _____

Longitude: _____

Elevation: _____

Datum: _____

Data Collection Method: _____

3 MARK WELL'S LOCATION
WITH AN "X" IN SECTION
BOX:4 DEPTH OF WELL 7 ft.WELL'S STATIC WATER LEVEL 7 ft

WELL WAS USED AS:

1 Domestic

2 Irrigation

3 Feedlot

4 Industrial

5 Public Water Supply

6 Oil Field Water Supply

7 Domestic (Lawn & Garden)

8 Air Conditioning

9 Dewatering

10 Monitoring

11 Injection Well

12 Other CattleWas a chemical/bacteriological sample submitted to Department? Yes _____ No XWell disinfected

5 TYPE OF BLANK CASING USED:

1 Steel

3 RMP (SR)

5 Wrought

7 Fiberglass

9 Other (Specify below)

2 PVC

4 ABS

6 Asbestos-Cement

8 Concrete Tile

ROCKBlank casing diameter 60 in. Was casing pulled? Yes X No _____ If yes, how much 3'Casing height above or below land surface 72 in.

6 GROUT PLUG MATERIAL:

1 Neat cement

2 Cement grout

3 Bentonite

4 Other _____

Grout Plug Intervals: From 3 ft. to 2 ft., From _____ ft. to _____ ft., From _____ to _____ ft.

What is the nearest source of possible contamination:

1 Septic tank

6 Seepage pit

11 Fuel Storage

16 Other (specify below)

2 Sewer lines

7 Pit privy

12 Fertilizer storage

3 Watertight sewer lines

8 Sewage lagoon

13 Insecticide storage

4 Lateral lines

9 Feedyard

14 Abandoned water well

Direction from well? _____

5 Cess pool

10 Livestock pens

15 Oil well/Gas well

How many feet? _____

FROM	TO	PLUGGING MATERIALS	FROM	TO	PLUGGING MATERIALS
<u>7'</u>	<u>5'</u>	<u>Granular Fill</u>			
<u>5'</u>	<u>3'</u>	<u>Compact Clay</u>			
<u>3'</u>	<u>2'</u>	<u>Cement Grout</u>			
<u>2'</u>	<u>0'</u>	<u>Top Soil</u>			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 7/10/06 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. _____. This Water Well Record was completed on (mo/day/year) 7/11/06 under the business name of _____ by (signature) Stephen Plaster

INSTRUCTIONS: Use typewriter or ballpoint pen. Please press firmly and print clearly. Please fill in blanks, underline or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Ste. 420, Topeka, Kansas 66612-1367. Telephone: 785/296-5522. Send one to Water Well Owner and retain one for your records. Visit us at <http://www.kdheks.gov/geo/waterwells>.