

WATER WELL PLUGGING RECORD Form WWC-5P

KSA 82a-1212

ID NO.

1 LOCATION OF WATER WELL: County: Butler	Fraction SE 1/4 Sw 1/4 SW 1/4 SW 1/4	Section Number 5	Township Number T 27 S	Range Number 3 <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 ☐ **300 E. 21st Street Andover, KS 67002**

Global Positioning Systems (GPS) information:

Latitude: **37.723538** (in decimal degrees)

Longitude: **-97.133062** (in decimal degrees)

Elevation:

Horizontal Datum: ☒ WGS84, ☐ NAD83, ☐ NAD27

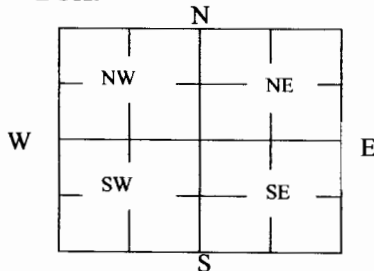
Collection Method:

2 WATER WELL OWNER: Triple E Properties
RR#, St. Address, Box #: **2819 W. Driftwood Cir.**
City, State ZIP Code: **Wichita, KS 67204**

☐ 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:



4 DEPTH OF WELL 46 ft.

WELL'S STATIC WATER LEVEL 26 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 ☐ No ☐

5 TYPE OF BLANK CASING USED:

- ☒ Steel ☐ RMP (SR) ☐ Wrought ☐ Fiberglass ☐ Other (Specify below)
☐ PVC ☐ ABS ☐ Asbestos-Cement ☐ Concrete Tile

Blank casing diameter 6 in. Was casing pulled? Yes ☐ No ☒ If yes, how much _____
Casing height above or below land surface ** in.

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

Grout Plug Intervals: From 3 ft. to 0 ft., From 46 ft. to 3 ft., From _____ ft. to _____ ft.

What is the nearest source of possible contamination:

- | | | | |
|---|---|---|--|
| <input 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? _____ |
| <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	Portland cement			**Top of plugged casing was flush with
3	46	Bentonite, hydrated in shifts			concrete floor of building, followed by
					additional 4-inches of concrete as part
					of building renovation. KDHE approved
					10/26/2018.

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 11/28/2018 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. n/a. This Water Well Record was completed on (mo/day/year) 12/14/2018 under the business name of Triple E Properties by (signature) Harry Kirkman

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.

DEC 26 2018

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Revised 1/20/2015