SVE (SUW)

WATER WELL PLUGGING RECORD   Form WWC-5P   KSA 82a-1212   ID NO. [   ]

1 LOCATION OF WATER WELL:

County: Butler	Fraction SE ¼ ¼ SW ¼ SW ¼	Section Number 22	Township Number 27 S	Range Number 4 ☑E ☐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: _____ (in decimal degrees)
Longitude: _____ (in decimal degrees)
Elevation: _____
Datum: ☐ WGS84, ☐ NAD83, ☐ NAD27
Collection Method:
☐ GPS unit (Make/Model: _____
☐ Digital Map/Photo, ☐ Topographic Map, ☐ Land Survey
Est. Accuracy: ☐ <3 m, ☐ 3-5 m, ☐ 5-15 m, ☐ >15 m

2 WATER WELL OWNER:
RR#, St. Address, Box #: Coastal Mart
City, State ZIP Code: 610 W 7 KS
Augusta, KS

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

```
        N
  NW  |  NE
W --- + --- E
  SW  |  SE
        S
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4 DEPTH OF WELL 14 **ft.**

WELL'S STATIC WATER LEVEL _____ ft

WELL WAS USED AS:

☐ Domestic   ☐ Public Water Supply   ☐ Dewatering
☐ Irrigation   ☐ Oil Field Water Supply   ☐ Monitoring
☐ Feedlot   ☐ Domestic (Lawn & Garden) ☐ Injection Well
☐ Industrial   ☐ Air Conditioning   ☑ Other Soil Vapor Extraction

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 4.5 in. Was casing pulled? Yes ☑ No ☐ If yes, how much 3 ft
Casing height above or below land surface _____ in.   Flush Mount

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

Grout Plug Intervals: From 0 ft. to 14 ft., From ___ ft. to ___ ft., From ___ ft. to ___ ft.

What is the nearest source of possible contamination:

☐ Septic tank   ☐ Seepage pit   ☐ Fuel storage   ☐ Other (specify below)
☑ Sewer lines   ☐ Pit privy   ☐ Fertilizer storage
☑ Watertight sewer lines ☐ Sewage lagoon   ☐ Insecticide storage   _____
☐ Lateral lines   ☐ Feedyard   ☐ Abandoned water well   Direction from well? North
☐ Cess pool   ☐ Livestock pens   ☐ Oil well/Gas well   How many feet? 21

FROM	TO	PLUGGING MATERIALS	FROM	TO	PLUGGING MATERIALS
0	14	Neat cement			**RECEIVED**
					MAY 23 2011
					BUREAU OF WATER

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 04/30/11 _____ 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) 05/19/11 under the business name of Prudent Technologies Inc by (signature) _____

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: 785/296-5524. Send one to Water Well Owner and retain one for your records. Visit us at http://www.kdheks.gov/waterwell/index.html.