

**WATER WELL PLUGGING RECORD**

Form WWC-5P

KSA 82a-1212

ID NO. \_\_\_\_\_

1 LOCATION OF WATER WELL: County: <b>Butler</b>	Fraction <b>NW 1/4 NW 1/4 NE 1/4 NW 1/4</b>	Section Number <b>26</b>	Township Number <b>T 28 S</b>	Range Number <b>3</b> <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  
 **12729 S. W. 160th St.**  
 **Rose Hill, Kansas 67133**

Global Positioning Systems (GPS) information:  
 Latitude: ~~37.075~~ **37.592** (in decimal degrees)  
 Longitude: ~~-97.37.592~~ **-97.075** (in decimal degrees)  
 Elevation: \_\_\_\_\_  
 Horizontal Datum:  WGS84,  NAD83,  NAD27  
 Collection Method: \_\_\_\_\_

2 WATER WELL OWNER: **TILLOTSON, Austin**  
 RR#, St. Address, Box #: **2543 S. Fairchild**  
 City, State ZIP Code: **Park City KS 67219**

GPS unit (Make/Model: **iPhone**)  
 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:

		N		
		<input checked="" type="checkbox"/>		
	NW		NE	
W				E
	SW		SE	
		S		

4 DEPTH OF WELL **80** ft.  
 WELL'S STATIC WATER LEVEL **50** 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 \_\_\_\_\_  
 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 **5** in. Was casing pulled? Yes  No  If yes, how much \_\_\_\_\_  
 Casing height above or below land surface **36" below** in.

6 GROUT PLUG MATERIAL:  Neat cement  Cement grout  Bentonite  Other \_\_\_\_\_  
 Grout Plug Intervals: From **4** ft. to **24** 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? **South**  
 Cess pool  Livestock pens  Oil well/Gas well How many feet? **300 ft. plus**

FROM	TO	PLUGGING MATERIALS	FROM	TO	PLUGGING MATERIALS
0	4	compacted topsoil			
4	24	bentonite			
24	80	well gravel			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) **7/29/2022** 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) **8/2/2022** 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.