

## WATER WELL PLUGGING RECORD

Form WWC-5P

KSA 82a-1212

ID No.

MW-3

1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: <b>Labette</b>	<b>SE ¼ SE ¼ NW ¼</b>	<b>18</b>	<b>31</b>	<b>20 E</b>

Distance and direction from nearest town or city street address of well if located within city?  
**806 N 16<sup>th</sup> Street, Parsons**

2 WATER WELL OWNER: <b>Parcom Telephone CO;</b> RR#, St. Address, Box # <b>806 N 16<sup>th</sup> St.</b> City, State, ZIP Code : <b>Parsons, KS</b>	Board of Agriculture, Division of Water Resources Application Number:
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3 MARK WELL'S LOCATON WITH AN "X" IN SECTION BOX:	4 DEPTH OF WELL <b>15.0</b> ft.						
<div style="text-align: center;">N</div> <table border="1" style="margin: auto; border-collapse: collapse;"> <tr> <td style="width: 50px; height: 50px; text-align: center;">NW</td> <td style="width: 50px; height: 50px; text-align: center;">NE</td> </tr> <tr> <td style="width: 50px; height: 50px; text-align: center;">X</td> <td style="width: 50px; height: 50px;"></td> </tr> <tr> <td style="width: 50px; height: 50px; text-align: center;">SW</td> <td style="width: 50px; height: 50px; text-align: center;">SE</td> </tr> </table> <div style="text-align: center;">S</div>	NW	NE	X		SW	SE	WELL'S STATIC WATER LEVEL <b>7.98</b> ft.  WELL WAS USED AS: <div style="display: flex; justify-content: space-between;"> <div> 1 Domestic  2 Irrigation  3 Feedlot  4 Industrial </div> <div> 5 Public Water Supply  6 Oil Field Water Supply  7 Lawn and Garden (domestic)  8 Air Conditioning </div> <div> 9 Dewatering  10 Monitoring Well  11 Injection Well  12 Other </div> </div>
	NW	NE					
	X						
	SW	SE					
Was a chemical/bacteriological sample submitted to Department? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If yes, mo/day/yr sample was submitted _____ Water Well Disinfected: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>							
5 TYPE OF BLANK CASING USED: 1 Steel      3 RMP (SR)      5 Wrought      7 Fiberglass      9 Other (specify below) 2 PVC      4 ABC      6 Asbestos-Cement      8 Concrete Tile Blank casing diameter <b>2.375</b> in. Was casing pulled? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> If yes, how much? <b>3'</b> Casing height above or below land surface <b>Unknown</b> in.							
6 GROUT PLUG MATERIAL: 1 Neat cement    2 Cement grout    3 Bentonite    4 Other <b>Gravel/Concrete</b> Grout Plug Intervals From <b>15.0</b> ft. to <b>3.0</b> ft. From <b>3.0</b> ft. to <b>1.0</b> ft. From <b>1.0</b> ft. to <b>0.0</b> ft. What is the nearest source of possible contamination: <div style="display: flex; justify-content: space-between;"> <div> 1 Septic tank  2 Sewer lines  3 Watertight sewer lines  4 Lateral lines  5 Cess Pool </div> <div> 6 Seepage pit  7 Pit privy  8 Sewage lagoon  9 Feedyard  10 Livestock pens </div> <div> 11 Fuel storage (former)  12 Fertilizer storage  13 Insecticide storage  14 Abandoned water well  15 Oil well/ Gas well </div> <div> 16 Other (specify below) </div> </div>							

Direction from well? **N/A** How many feet? **0**

FROM	TO	CODE	PLUGGING MATERIALS
0.0	1.0		Concrete
1.0	3.0		Gravel
3.0	15.0		Bentonite chips

7	CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/yr) <b>05/26/08</b> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <b>692</b> This Water Well Record was completed on (mo/day/yr) <b>06/10/08</b> under the business name of <b>Quad State Services, Inc.</b> by (signature) <i>[Signature]</i>
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INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment, Bureau of Water, 1000 S W Jackson St., Ste. 420, Topeka, Kansas 66620-0001. Telephone: 785-296-3565. Send one to Water Well Owner and retain one for your records.