

mw-1

WATER WELL PLUGGING RECORD

Form WWC-5P

KSA 82a-1212

ID NO. _____

1	LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number																								
	County: <u>Cherokee</u>	<u>NW 1/4 NE 1/4 SE 1/4</u>	<u>26</u>	<u>32</u>	<u>22</u> B/W																								
Distance and direction from nearest town or city street address of well if located within city? <u>3600 NW 74th St. Columbus, NE - well located inside facility</u>																													
2	WATER WELL OWNER: <u>Chemex 1</u>																												
RR #, St. Address, Box #: <u>16 South Pennsylvania</u>			Board of Agriculture, Division of Water Resources																										
City, State, ZIP Code: <u>Oklahoma, OK 73107</u>			Application Number: _____																										
3	MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4	DEPTH OF WELL <u>25</u> ft.																									
<div style="text-align: center;">N</div> <table border="1" style="width: 100%; height: 100px; border-collapse: collapse;"> <tr> <td style="width: 25%; text-align: center;">NW</td> <td style="width: 25%; text-align: center;">NE</td> <td style="width: 25%; text-align: center;">SW</td> <td style="width: 25%; text-align: center;">SE</td> </tr> <tr> <td style="text-align: center;">W</td> <td style="text-align: center;">X</td> <td style="text-align: center;">E</td> <td></td> </tr> <tr> <td style="text-align: center;">S</td> <td></td> <td></td> <td></td> </tr> </table>		NW	NE	SW	SE	W	X	E		S				WELL'S STATIC WATER LEVEL <u>surface</u> ft.															
		NW	NE	SW	SE																								
		W	X	E																									
		S																											
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 Domestic (Lawn & Garden) 8 Air Conditioning </div> <div> 9 Dewatering 10 Monitoring Well 11 Injection Well 12 Other _____ </div> </div>																													
Was a chemical / bacteriological sample submitted to Department? Yes _____ No <u>X</u> If yes, mo/day/yr sample was submitted _____ Water Well Disinfected: Yes _____ No <u>X</u>																													
5	TYPE OF BLANK CASING USED:																												
<div style="display: flex; justify-content: space-between;"> <div> 1 Steel 2 PVC </div> <div> 3 RMP (SR) 4 ABS </div> <div> 5 Wrought 6 Asbestos-Cement </div> <div> 7 Fiberglass 8 Concrete Tile </div> <div> 9 Other (Specify below) _____ </div> </div>																													
Blank casing diameter <u>2</u> in. Was casing pulled? Yes <u>X</u> No _____ If yes, how much <u>ALL</u> Casing height above or below land surface <u>Flush</u> in _____																													
6	GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other <u>Gravel</u>																												
Grout Plug Intervals: From <u>25</u> ft. to <u>2</u> ft., From <u>2</u> ft. to <u>0</u> ft., From _____ to _____ 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 12 Fertilizer storage 13 Insecticide storage 14 Abandoned water well 15 Oil well/Gas well </div> <div> 16 Other (specify below) <u>Explosives Facility</u> </div> </div>																													
Direction from well? _____ How many feet? _____																													
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 15%;">FROM</th> <th style="width: 15%;">TO</th> <th style="width: 70%;">PLUGGING MATERIALS</th> </tr> </thead> <tbody> <tr> <td><u>0</u></td> <td><u>2</u></td> <td><u>Gravel</u></td> </tr> <tr> <td><u>2'</u></td> <td><u>25</u></td> <td><u>Bentonite Grout</u></td> </tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> </tbody> </table>						FROM	TO	PLUGGING MATERIALS	<u>0</u>	<u>2</u>	<u>Gravel</u>	<u>2'</u>	<u>25</u>	<u>Bentonite Grout</u>															
FROM	TO	PLUGGING MATERIALS																											
<u>0</u>	<u>2</u>	<u>Gravel</u>																											
<u>2'</u>	<u>25</u>	<u>Bentonite Grout</u>																											
7	CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) <u>4-8-08</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>710</u> This Water Well Record was completed on (mo/day/year) <u>5-3-08</u> under the business name of <u>Robert Grant & Son, Inc.</u>																												
by (signature) <u>[Signature]</u>																													
INSTRUCTIONS: Use typewriter or ball point 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.																													