

WATER WELL PLUGGING RECORD

Constructed 30250
Form **WWC-5P**

KSA 82a-1212

ID NO. _____

1 LOCATION OF WATER WELL: County: CHEROKEE	Fraction SE ¼ NE ¼ NW ¼ ¼	Section Number 14	Township Number T 33 S	Range Number 23 <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

Global Positioning Systems (GPS) information:
 Latitude: 37.1759 (in decimal degrees)
 Longitude: -94.8598 (in decimal degrees)
 Elevation: _____
 Datum: WGS84, NAD83, NAD27
 Collection Method:
 GPS unit (Make/Model: MAGELLEN)
 Digital Map/Photo, Topographic Map, Land Survey
 Est. Accuracy: < 3 m, 3-5 m, 5-15 m, > 15 m

2 WATER WELL OWNER: DIXIE WELLS
 RR#, St. Address, Box #: **338 N. BAY AVE**
 City, State ZIP Code: **COLUMBUS, KS 66725**

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

N		
NW	X	NE
SW		SE
S		

W E

4 DEPTH OF WELL 250 ft.
 WELL'S STATIC WATER LEVEL NA 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 Geothermal

Was a chemical/bacteriological sample submitted to Department? Yes No

5 TYPE OF BLANK CASING USED:

<input type="checkbox"/> Steel	<input type="checkbox"/> RMP (SR)	<input type="checkbox"/> Wrought	<input type="checkbox"/> Fiberglass	<input checked="" type="checkbox"/> Other (Specify below)
<input type="checkbox"/> PVC	<input type="checkbox"/> ABS	<input type="checkbox"/> Asbestos-Cement	<input type="checkbox"/> Concrete Tile	<u>NA</u>

Blank casing diameter _____ 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 0 ft. to 250 ft., From _____ ft. to _____ ft., From _____ 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 HOUSE
 Watertight sewer lines Sewage lagoon Insecticide storage
 Lateral lines Feedyard Abandoned water well
 Cess pool Livestock pens Oil well/Gas well
 Direction from well? NORTH
 How many feet? 15

FROM	TO	PLUGGING MATERIALS	FROM	TO	PLUGGING MATERIALS
0	10	YELLOW SANDY CLAY	150	250	BLUE SHALE
10	20	YELLOW SHALE			
20	35	BLUE SHALE			
35	40	COAL			
40	45	WHITE CALICHE			
45	130	BLUE SHALE			
130	150	WHITE ROCK			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 10/05/11 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 812. This Water Well Record was completed on (mo/day/year) 10/07/11 under the business name of Environmental Loop Service, Inc by (signature) Richard Moore

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>.

Check one: White Copy Blue Copy Pink Copy