

USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

# Plugging Report

WATER WELL RECORD  
KSA 82a-1201-1215

Kansas Department of Health and Environment-Division of Environment  
(Water well Contractors)  
Topeka, Kansas 66620

1. Location of well:	County <b>Labette</b>	Fraction <b>SE 1/4 SE 1/4 SE 1/4</b>	Section number <b>25</b>	Township number <b>T 34 S R 19</b>	Range number <b>E/W</b>																														
2. Distance and direction from nearest town or city: Street address of well location if in city:		<b>5 miles east of Edna</b>		3. Owner of well: <b>KS. Dept. of Transportation</b> R.R. or street: City, state, zip code:																															
4. Locate with "X" in section below: Sketch map: <b>Sta. 439+42 (42 ft. Lt. L) on Proj. 166-50 F BRF-010-2 (35)</b>			6. Bore hole dia. <b>4.5 ft.</b> Completion date _____ Well depth <b>15</b> ft.																																
			7. <input type="checkbox"/> Cable tool <input type="checkbox"/> Rotary <input type="checkbox"/> Driven <input type="checkbox"/> Dug <input type="checkbox"/> Hollow rod <input type="checkbox"/> Jetted <input type="checkbox"/> Bored <input type="checkbox"/> Reverse rotary																																
			8. Use: <input type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry <input type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input type="checkbox"/> Stock <input type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other																																
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 50%;">5. Type and color of material</th> <th style="width: 10%;">From</th> <th style="width: 10%;">To</th> </tr> </thead> <tbody> <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> <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>			5. Type and color of material	From	To																												9. Casing: Material <b>Lime stone</b> Height: Above or below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface _____ in. RMP _____ PVC _____ Weight _____ lbs./ft. Dia. _____ in. to _____ ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. _____		
			5. Type and color of material	From	To																														
10. Screen: Manufacturer's name _____ Type _____ Dia. _____ Slot/gauze _____ Length _____ Set between _____ ft. and _____ ft. _____ ft. and _____ ft. Gravel pack? <input type="checkbox"/> Size range of material _____																																			
11. Static water level: _____ mo./day/yr. <b>2.5</b> ft. below land surface Date <b>5/11/79</b>																																			
12. Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield _____ g.p.m.																																			
13. Water sample submitted: _____ mo./day/yr. <input type="checkbox"/> Yes <input type="checkbox"/> No Date _____																																			
14. Well head completion: <input type="checkbox"/> Pitless adapter _____ Inches above grade																																			
15. Well grouted? <input type="checkbox"/> With: <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From _____ ft. to _____ ft.																																			
16. Nearest source of possible contamination: ft. _____ Direction _____ Type _____ Well disinfected upon completion? <input type="checkbox"/> Yes <input type="checkbox"/> No																																			
17. Pump: _____ Not installed Manufacturer's name _____ Model number _____ HP _____ Volts _____ Length of drop pipe _____ ft. capacity _____ g.p.m. Type: <input type="checkbox"/> Submersible <input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating <input type="checkbox"/> Centrifugal <input type="checkbox"/> Other																																			
(Use a second sheet if needed)																																			
18. Elevation:  Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley	19. Remarks: <b>Plugged 5/11/79.</b> <b>Filled with chat (5 tons) to a point 3 ft. below land surface. Top sealed with 3 Cu. Yds. concrete.</b>		20. Water well contractor's certification: This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.  Business name _____ License No. _____ Address _____ Signed _____ Date _____ Authorized representative																																

Forward the white, blue and pink copies to the Department of Health and Environment

Form WWC-5