| | WATER WELL PLUGGING R | ECORD Form WWC-5P | KSA 82a-1212 ID N | 0 |
|---|--|--|-----------------------|---------------|
| 1 LOCATION OF WATER WELL: | Fraction | Section Number | Township Number | Range Number |
| county: Washington | SW4 SW14 SW14 | 24 | 3 | _2 EM |
| Distance and direction from nearest town or | city street address of well if loca | · · · · · · · · · · · · · · · · · · · | | |
| 2 miles south, 12 mile east, 3 miles south of Morrowville | | | | |
| 2 WATER WELL OWNER: SCOTT Weber | | | | |
| RR #, St. Address, Box #: 1211 1414 Rd Board of Agriculture, Division of Water Resources | | | | |
| City, State, ZIP Code: Washington VS 64948 Application Number: | | | | |
| 3 MARK WELL'S LOCATION WITH | 4 DEPTH OF WELL | 72 ft. | | |
| AN "X" IN SECTION BOX: | WELL'S STATIC WATE | R LEVEL | | |
| N T T T T | WELL WAS USED AS: | | | |
| | | | | |
| NW NE | 1 Domestic 2 Irrigation | 5 Public Water Supply6 Oil Field Water Supply | | ng Ng Well |
| - | 3 Feedlot | 7 Domestic (Lawn & G | arden) 11 Injection | Well |
| W | 4 Industrial | 8 Air Conditioning | 12 Other | |
| Was a chemical / bacteriological sample submitted to Department? Yes | | | | |
| | If yes, mo/day/yr sample was submitted | | | |
| X S | Water Well Disinfected: Ye | s No | | |
| 3 | | | | |
| 5 TYPE OF BLANK CASING USED: | | | | • |
| Steel 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (Specify below) 2 PVC 4 ABS 6 Aspestos-Cement 8 Concrete Tile | | | | |
| Blank casing diameter in. Was casing pulled? Yes No | | | | |
| Casing height above or below land surface in. | | | | |
| 6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 sentonite 4 Other | | | | |
| Grout Plug Intervals: From ft. to ft., Fromft. toft., From ft., From | | | | |
| What is the nearest source of possible | contamination: | | | |
| 1 Septic tank 2 Sewer lines | 6 Seepage pit 7 Pit privy | 11 Fuel storage12 Fertilizer storage | 16 Other (spec | • |
| 3 Watertight sewer lines | 8 Sewage lagoon | 13 Insecticide storage | | |
| 4 Lateral lines5 Cess pool | 9 Feedyard | 14 Abandoned water v | vell | |
| | 10 Livestock pens | 15 Oil well/Gas well | | |
| Direction from well? How many feet? | | | | |
| FROM TO PL | UGGING MATERIALS | | | |
| Off 3ft Tooso | il | | | |
| 3 FL 10 FL Bo. A | 01. 01 | | | |
| JAY ULT BANDON | 1 CII | | | |
| 10++ UAFF SUBSO | 1411 | | | |
| USH 724 Chlorin | ated Sand | | | |
| | | | | |
| | | | | |
| | | | | |
| 7 CONTRACTORIS OF LANDOWS | 'D'C CEDTIEICATION TO | | and the second second | |
| CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) | | | | |
| Water Well Contractor's License No | | | | |
| by (signature) | e business name of | | | |
| 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. | | | | |