

**WATER WELL PLUGGING RECORD Form WWC-5P KSA 82a-1212 ID NO.**

<b>1 LOCATION OF WATER WELL:</b> County: Atchison	Fraction ¼ ¼ NW ¼ NE ¼	Section Number 27	Township Number T 6 S	Range Number 17 <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  N of intersection of Chautauqua Rd & Rt.  
116 SW of Effingham, Kansas

**2 WATER WELL OWNER:** Atchison Co CRWD No. 5  
RR#, St. Address, Box #: P.O. Box 65  
City, State ZIP Code: Lancaster, KS 66041

**Global Positioning Systems (GPS) information:**  
Latitude: 39 deg 30.415'N (in decimal degrees)  
Longitude: 95 deg 30.248' W (in decimal degrees)  
Elevation: \_\_\_\_\_  
Datum:  WGS84,  NAD83,  NAD27  
Collection Method: \_\_\_\_\_  
 GPS unit (Make/Model: \_\_\_\_\_)  
 Digital Map/Photo,  Topographic Map,  Land Survey  
Est. Accuracy:  < 3 m,  3-5 m,  5-15 m,  > 15 m

<p><b>3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:</b></p> <div style="text-align: center;"> </div>	<p><b>4 DEPTH OF WELL</b> <u>97.5</u> ft. WELL'S STATIC WATER LEVEL <u>7</u> ft. WELL WAS USED AS:  <input type="checkbox"/> Domestic      <input type="checkbox"/> Public Water Supply      <input type="checkbox"/> Dewatering  <input type="checkbox"/> Irrigation      <input type="checkbox"/> Oil Field Water Supply      <input checked="" type="checkbox"/> Monitoring  <input type="checkbox"/> Feedlot      <input type="checkbox"/> Domestic (Lawn &amp; Garden)      <input type="checkbox"/> Injection Well  <input type="checkbox"/> Industrial      <input type="checkbox"/> Air Conditioning      <input type="checkbox"/> Other _____                  Was a chemical/bacteriological sample submitted to Department? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/></p>
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**5 TYPE OF BLANK CASING USED:**

Steel     RMP (SR)     Wrought     Fiberglass     Other (Specify below) \_\_\_\_\_  
 PVC     ABS     Asbestos-Cement     Concrete Tile

Blank casing diameter 5 in. Was casing pulled? Yes  No  If yes, how much \_\_\_\_\_  
 Casing height above or below land surface cut 36 B.G. in.

**6 GROUT PLUG MATERIAL:**  Neat cement     Cement grout     Bentonite     Other \_\_\_\_\_

Grout Plug Intervals: From 30 ft. to -3 BG 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  
 Watertight sewer lines     Sewage lagoon     Insecticide storage  
 Lateral lines     Feedyard     Abandoned water well    Direction from well? \_\_\_\_\_  
 Cess pool     Livestock pens     Oil well/Gas well    How many feet? \_\_\_\_\_

FROM	TO	PLUGGING MATERIALS	FROM	TO	PLUGGING MATERIALS
97.5	30	Chlorinated sand			
30	3	Bentonite Holeplug			
3	Grade	Topsoil			

**7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:** This water well was plugged under my jurisdiction and was completed on (mo/day/year) 1/3/12 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 102. This Water Well Record was completed on (mo/day/year) 1/9/13 under the business name of Layne Christensen Company by (signature)

**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