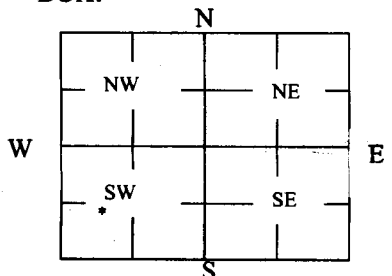


1 LOCATION OF WATER WELL: County: Atchison	Fraction nw ¼ sw ¼ nw ¼ sw ¼	Section Number 34	Township Number 6 T S	Range Number 18 <input checked="" type="checkbox"/> E <input type="checkbox"/> W
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Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here <input type="checkbox"/> 3 miles south of Effingham	Global Positioning Systems (GPS) information: Latitude: <u>39.483114</u> (in decimal degrees) Longitude: <u>95.402467</u> (in decimal degrees) Elevation: _____ Horizontal Datum: <input type="checkbox"/> WGS84, <input checked="" type="checkbox"/> NAD83, <input type="checkbox"/> NAD27 Collection Method: _____
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2 WATER WELL OWNER: Ed Conner RR#, St. Address, Box #: P.O Box 204 City, State ZIP Code: Effingham, KS 66023	<input checked="" type="checkbox"/> GPS unit (Make/Model: <u>Trimble 99133</u>) <input type="checkbox"/> Digital Map/Photo, <input type="checkbox"/> Topographic Map, <input type="checkbox"/> Land Survey Est. Accuracy: <input type="checkbox"/> < 3 m, <input type="checkbox"/> 3-5 m, <input type="checkbox"/> 5-15 m, <input type="checkbox"/> > 15 m
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3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX: 	4 DEPTH OF WELL <u>60</u> ft. WELL'S STATIC WATER LEVEL <u>9</u> ft. WELL WAS USED AS: <input checked="" 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 type="checkbox"/> Monitoring <input type="checkbox"/> Feedlot <input type="checkbox"/> Domestic (Lawn & 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 type="checkbox"/> No <input checked="" type="checkbox"/>
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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 _____ in. Was casing pulled? Yes No If yes, how much 5ft at least

Casing height above or below land surface _____ in.


6 GROUT PLUG MATERIAL: Neat cement Cement grout Bentonite Other _____

Grout Plug Intervals: From _____ ft. to _____ ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.

What is the nearest source of possible contamination:

<input type="checkbox"/> Septic tank	<input type="checkbox"/> Seepage pit	<input type="checkbox"/> Fuel storage	<input type="checkbox"/> Other (specify below)
<input type="checkbox"/> Sewer lines	<input type="checkbox"/> Pit privy	<input type="checkbox"/> Fertilizer storage	
<input type="checkbox"/> Watertight sewer lines	<input type="checkbox"/> Sewage lagoon	<input type="checkbox"/> Insecticide storage	
<input type="checkbox"/> Lateral lines	<input type="checkbox"/> Feedyard	<input checked="" type="checkbox"/> Abandoned water well	Direction from well? _____
<input type="checkbox"/> Cess pool	<input type="checkbox"/> Livestock pens	<input type="checkbox"/> Oil well/Gas well	How many feet? _____

FROM	TO	PLUGGING MATERIALS	FROM	TO	PLUGGING MATERIALS
0ft	3ft	Top Soil			
3ft	6ft	Concrete grout			
6ft	6ft	Clay			
9ft	60ft	Gravel			
		1 gallon bag Chlorine			
		5 bags concrete grout			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 7/20/2020 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. _____. This Water Well Record was completed on (mo/day/year) 9/18/2020 under the business name of Mike Lutz by (signature) 

Send one white copy to Kansas Department of Health & Environment, Geology Section, 1000 SW Jackson Street, Ste. 420, Topeka, KS 66612-1367. Send one copy to WATER WELL OWNER and retain one for your records.
 Visit us at <http://www.kdheks.gov/waterwell/index.html> Telephone 785-296-5524.

**NPS POLLUTION CONTROL FUNDS
ABANDONED WATER WELL COST-SHARE PROGRAM
(WELL PLUGGING WORKSHEET)**

WORKSHEET: (Use water quality bulletin to complete this worksheet, available through Cooperative Extension Service)

Name: Ed Conner County: Atchison County Date: October 24, 2019

Type of Well: Drilled: Hand dug:

Diameter (Inside): 5 in Diameter (Outside): 5 in Depth to Water: 9 Total Depth: 60 ft

TOP SOIL:	<u>3</u> ft		TOP SOIL NEEDED:	
			<u>0.14</u> cu.ft/ft	x <u>3</u> ft = <u>0.4</u> cu.ft
			<u>0.4</u> cu.ft	x 1 cu.yd/27 cu.ft = <u>0.0</u> cu.yds
BENTONITE PLUG:	<u>3</u> ft		BENTONITE NEEDED:	
			PLUG: <u>0.14</u> cu.ft/ft	x <u>3</u> ft. = <u>0.4</u> cu.ft
			GROUT SEAL RESTORATION:	<u>2.2</u> cu.ft
			<u>2.6</u> cu.ft	x 1 bag/0.7 cu.ft = <u>3.8</u> bags
SUBSOIL:	<u>3</u> ft		SUBSOIL NEEDED:	
			<u>0.14</u> cu.ft/ft	x <u>3</u> ft = <u>0.4</u> cu.ft
			<u>0.4</u> cu.ft	x 1 cu.yd/27 cu.ft = <u>0.0</u> cu.yds
SAND (to water level):	<u>51</u> ft		SAND NEEDED:	
			<u>0.14</u> cu.ft/ft	x <u>51</u> ft = <u>7.0</u> cu.ft
			<u>7.0</u> cu.ft	x 1 cu.yd/27 cu.ft = <u>0.3</u> cu.yds
			CHLORINE NEEDED - Liquid (5.25%):	
			<u>1.24</u> oz/ft	x <u>51</u> ft = <u>63.5</u> oz
			<u>63.5</u> oz	x 1 gal/128 oz = <u>0.5</u> gal

SITE PREPARATION: REMOVE PUMP AND COLUMN PIPE AND DEBRIS. EXCAVATE AROUND DRILLED WELL CASING AND CUT CASING 3 FEET BELOW GROUND LEVEL. STOCKPILE FILL MATERIAL ON SITE. LEAVE IN TRUCK IF POSSIBLE. HANDDUG WELLS NEED TRACTOR WITH FRONT END LOAD OR LARGE PRY BARS TO CAVE IN ROCK LINING.