

WATER WELL PLUGGING RECORD Form WWC-5P

KSA 82a-1212

ID NO.

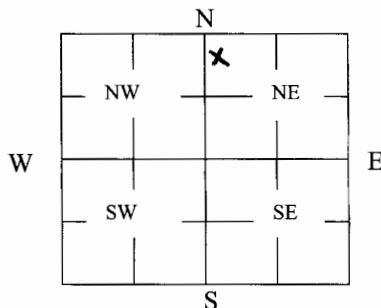
1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: <u>Clay</u>	<u>NW 1/4 NW 1/4 NE 1/4</u>	<u>36</u>	<u>8</u>	<u>1</u> <u>E/W</u>

Distance and direction from nearest town or city street address of well if located within city?

3 miles south and 8 1/2 miles west of Clay Center

2 WATER WELL OWNER: <u>Maxine Greenlee</u>	Global Positioning Systems (decimal degrees, min. of 4 digits)
RR#, St. Address, Box #: <u>548 14th Rd</u>	Latitude: _____
City, State ZIP Code: <u>Clay Center, KS 67432</u>	Longitude: _____
	Elevation: _____
	Datum: _____
	Data Collection Method: _____

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

4 DEPTH OF WELL 10 ft.

WELL'S STATIC WATER LEVEL _____ ft

WELL WAS USED AS:

- | | | |
|---|----------------------------|-------------------|
| <input checked="" type="radio"/> Domestic | 5 Public Water Supply | 9 Dewatering |
| 2 Irrigation | 6 Oil Field Water Supply | 10 Monitoring |
| 3 Feedlot | 7 Domestic (Lawn & Garden) | 11 Injection Well |
| 4 Industrial | 8 Air Conditioning | 12 Other _____ |

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

5 TYPE OF BLANK CASING USED:

- | | | | | |
|---------|------------|-------------------|-----------------|--|
| 1 Steel | 3 RMP (SR) | 5 Wrought | 7 Fiberglass | <input checked="" type="radio"/> Other (Specify below) |
| 2 PVC | 4 ABS | 6 Asbestos-Cement | 8 Concrete Tile | <u>Rock</u> |

Blank casing diameter 36 in. Was casing pulled? Yes _____ No ☒ If yes, how much _____

Casing height above or below land surface _____ in.

6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout ☒ 3 Bentonite 4 Other _____Grout Plug Intervals: From 4 1/2 ft. to 5 ft., From _____ ft. to _____ ft., From _____ to _____ ft.

What is the nearest source of possible contamination:

- | | | | |
|--------------------------|-------------------|-------------------------|----------------------------|
| 1 Septic tank | 6 Seepage pit | 11 Fuel Storage | 16 Other (specify below) |
| 2 Sewer lines | 7 Pit privy | 12 Fertilizer storage | _____ |
| 3 Watertight sewer lines | 8 Sewage lagoon | 13 Insecticide storage | _____ |
| 4 Lateral lines | 9 Feedyard | 14 Abandoned water well | Direction from well? _____ |
| 5 Cess pool | 10 Livestock pens | 15 Oil well/Gas well | How many feet? _____ |

FROM	TO	PLUGGING MATERIALS	FROM	TO	PLUGGING MATERIALS
<u>0</u>	<u>4 1/2</u>	<u>soil</u>			
<u>4 1/2</u>	<u>5</u>	<u>bentonite</u>			
<u>5</u>	<u>10</u>	<u>clay soil</u>			
Note: This well was not known to owner for over 60 years, but opened up this summer after rainfall event.					

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 11/5/07 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 11/5/07. This Water Well Record was completed on (mo/day/year) 11/5/07 under the business name of _____ by (signature) Maxine Greenlee

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: 785/296-5522. Send one to Water Well Owner and retain one for your records. Visit us at <http://www.kdheks.gov/geo/waterwells>.