

WATER WELL PLUGGING RECORD Form WWC-5P

KSA 82a-1212

ID NO.

ISCO-C-1

1 LOCATION OF WATER WELL: County: <u>Pottawatomie</u>	Fraction <u>1/4 1/4 NW 1/4 1/4</u>	Section Number <u>31</u>	Township Number <u>T 9 S</u>	Range Number <u>11</u> <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

16795 Say Rd, Wamego, KS 66547

Global Positioning Systems (GPS) information:

Latitude: 39.222451 (in decimal degrees)

Longitude: 96.326627 (in decimal degrees)

Elevation: 1114.5

Datum: WGS84, NAD83, NAD27

Collection Method:

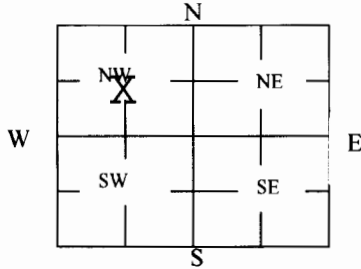
GPS unit (Make/Model: iPhone 5C)

Digital Map/Photo, Topographic Map, Land Survey

Est. Accuracy: < 3 m, 3-5 m, 5-15 m, > 15 m

2 WATER WELL OWNER: U.S. Army Corps of Eng.
RR#, St. Address, Box #: 601 East 12th ST
City, State ZIP Code: Kansas City, MO 64106

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



4 DEPTH OF WELL 114 ft.

WELL'S STATIC WATER LEVEL 103 ft

WELL WAS USED AS:

- Domestic
- Irrigation
- Feedlot
- Industrial

- Public Water Supply
- Oil Field Water Supply
- Domestic (Lawn & Garden)
- Air Conditioning

- Dewatering
- Monitoring
- Injection Well
- Other ISCO

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

5 TYPE OF BLANK CASING USED:

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

Blank casing diameter 4 in. Was casing pulled? Yes No If yes, how much _____
Casing height above or below land surface 30 in.

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

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

What is the nearest source of possible contamination:

- Septic tank
- Sewer lines
- Watertight sewer lines
- Lateral lines
- Cess pool
- Seepage pit
- Pit privy
- Sewage lagoon
- Feedyard
- Livestock pens
- Fuel Storage
- Fertilizer storage
- Insecticide storage
- Abandoned water well
- Oil well/Gas well
- Other (specify below) Unknown

Direction from well? _____
How many feet? _____

FROM	TO	PLUGGING MATERIALS	FROM	TO	PLUGGING MATERIALS
0	114	Neat Cement			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 11-3-14 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 597. This Water Well Record was completed on (mo/day/year) 11-3-14 under the business name of Cascade Drilling, L.P. by (signature) [Signature]

INSTRUCTIONS: Use typewriter or ballpoint pen. Please press firmly and print clearly. Please fill in blanks, underline or circle the correct answers. Send one copy 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>.