WATER WELL PLUGGING RECORD Form WWC-5P KSA 82a-1212 ID NO. Fraction SW 1/4 5 E 1/4 SE 1/4 LOCATION OF WATER WELL: Section Number Township Number Range Number County: **1255-11** Distance and direction from nearest town or city street address of well if located within city? 65 B. WITT RUSSELL KS WATER WELL OWNER: KDOT RUSSELL GI Global Positioning Systems (decimal degrees, min. of 4 digits Latitude: 38-872-008

Longitude: -98-857-5854

Elevation: 1832-17 RR#, St. Address, Box #: 165 E. WITT City, State ZIP Code: 1255011 145 67665 Data Collection Method: Sorvey DEPTH OF WELL 28.27 MARK WELL'S LOCATION WITH AN "X" IN SECTION WELL'S STATIC WATER LEVEL 2225 BOX: WELL WAS USED AS: 1 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 8 Air Conditioning 4 Industrial 12 Other \_\_\_ Was a chemical/bacteriological sample submitted to Department? Yes\_\_\_\_\_ No \_ TYPE OF BLANK CASING USED: 1 Steel 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (Specify below) 4 ABS 6 Asbestos-Cement 8 Concrete Tile Blank casing diameter Z in. Was casing pulled? Yes X No \_\_\_\_\_ If yes, how much Z8.22 Casing height above or below land surface \_\_\_\_\_ in. 2 Cement grout **GROUT PLUG MATERIAL:** 1 Neat cement 3 Bentonite 4 Other 6 ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft., From \_\_\_\_ to \_\_\_\_ ft. Grout Plug Intervals: What is the nearest source of possible contamination: 16 Other (specify below) 6 Seepage pit 1 Septic tank 11 Fuel Storage 2 Sewer lines 7 Pit privy 12 Fertilizer storage 8 Sewage lagoon 13 Insecticide storage 3 Watertight sewer lines 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? \_ PLUGGING MATERIALS FROM TO PLUGGING MATERIALS FROM Benjonite Chifs ce and ASPACLT 7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) \_\_\_\_\_\_ 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) \_\_\_\_\_\_\_ under the

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.