

WATER WELL PLUGGING RECORD Form WWC-5P

KSA 82a-1212

ID NO.

1 LOCATION OF WATER WELL: County: TREGO 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"/> 23033 T RD WAKEENEY, KS 67672	Fraction NW 1/4 SW 1/4 NE 1/4 SW 1/4 Section Number 6 Township Number T 14 S Range Number 23 <input type="checkbox"/> E <input checked="" type="checkbox"/> W	Global Positioning Systems (GPS) information: Latitude: 38.860608 (in decimal degrees) Longitude: -99.723866 (in decimal degrees) Elevation: 2341 Horizontal Datum: <input type="checkbox"/> WGS84, <input type="checkbox"/> NAD83, <input type="checkbox"/> NAD27 Collection Method: <input type="checkbox"/> GPS unit (Make/Model: _____) <input checked="" type="checkbox"/> Digital Map/Photo, <input type="checkbox"/> Topographic Map, <input type="checkbox"/> Land Survey Est. Accuracy: <input type="checkbox"/> <3 m, <input checked="" type="checkbox"/> 3-5 m, <input type="checkbox"/> 5-15 m, <input type="checkbox"/> >15 m																																																
2 WATER WELL OWNER: KAY LINDEN RR#, St. Address, Box #: 1173 NE 10TH RD City, State ZIP Code: ELLINWOOD, KS 67526	3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX: <div style="text-align: center;"> </div>																																																	
4 DEPTH OF WELL <u>21'2"</u> ft. Well 3 of 4 WELL'S STATIC WATER LEVEL <u>4</u> ft. WELL WAS USED AS: <div style="display: flex; justify-content: space-between;"> <div style="width: 30%;"> <input type="checkbox"/> Domestic <input type="checkbox"/> Irrigation <input type="checkbox"/> Feedlot <input type="checkbox"/> Industrial </div> <div style="width: 30%;"> <input type="checkbox"/> Public Water Supply <input type="checkbox"/> Oil Field Water Supply <input type="checkbox"/> Domestic (Lawn & Garden) <input type="checkbox"/> Air Conditioning </div> <div style="width: 30%;"> <input type="checkbox"/> Dewatering <input type="checkbox"/> Monitoring <input type="checkbox"/> Injection Well <input type="checkbox"/> Other _____ </div> </div> Was a chemical/bacteriological sample submitted to Department? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>																																																		
5 TYPE OF BLANK CASING USED: <div style="display: flex; justify-content: space-between;"> <div style="width: 20%;"> <input checked="" type="checkbox"/> Steel <input type="checkbox"/> PVC </div> <div style="width: 20%;"> <input type="checkbox"/> RMP (SR) <input type="checkbox"/> ABS </div> <div style="width: 20%;"> <input type="checkbox"/> Wrought <input type="checkbox"/> Asbestos-Cement </div> <div style="width: 20%;"> <input type="checkbox"/> Fiberglass <input type="checkbox"/> Concrete Tile </div> <div style="width: 20%;"> <input type="checkbox"/> Other (Specify below) _____ </div> </div> Blank casing diameter <u>16</u> in. Was casing pulled? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If yes, how much _____ Casing height above or below land surface <u>14</u> in.																																																		
6 GROUT PLUG MATERIAL: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Cement grout <input checked="" type="checkbox"/> Bentonite <input type="checkbox"/> Other _____ Grout Plug Intervals: From <u>0</u> ft. to <u>2'6"</u> ft., From <u>2'6"</u> ft. to <u>3'6"</u> ft., From _____ ft. to _____ ft. What is the nearest source of possible contamination: <div style="display: flex; justify-content: space-between;"> <div style="width: 30%;"> <input type="checkbox"/> Septic tank <input type="checkbox"/> Sewer lines <input type="checkbox"/> Watertight sewer lines <input type="checkbox"/> Lateral lines <input type="checkbox"/> Cess pool </div> <div style="width: 30%;"> <input type="checkbox"/> Seepage pit <input type="checkbox"/> Pit privy <input type="checkbox"/> Sewage lagoon <input type="checkbox"/> Feedyard <input type="checkbox"/> Livestock pens </div> <div style="width: 30%;"> <input type="checkbox"/> Fuel storage <input type="checkbox"/> Fertilizer storage <input type="checkbox"/> Insecticide storage <input type="checkbox"/> Abandoned water well <input type="checkbox"/> Oil well/Gas well </div> </div> <input type="checkbox"/> Other (specify below) _____ Direction from well? _____ How many feet? _____																																																		
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>FROM</th> <th>TO</th> <th>PLUGGING MATERIALS</th> <th>FROM</th> <th>TO</th> <th>PLUGGING MATERIALS</th> </tr> </thead> <tbody> <tr> <td>21'2"</td> <td>3'6"</td> <td>BLEACH/SAND</td> <td></td> <td></td> <td></td> </tr> <tr> <td>3'6"</td> <td>2'6"</td> <td>BENTONITE</td> <td></td> <td></td> <td></td> </tr> <tr> <td>2'6"</td> <td>0</td> <td>CEMENT</td> <td></td> <td></td> <td></td> </tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> </tbody> </table>			FROM	TO	PLUGGING MATERIALS	FROM	TO	PLUGGING MATERIALS	21'2"	3'6"	BLEACH/SAND				3'6"	2'6"	BENTONITE				2'6"	0	CEMENT																											
FROM	TO	PLUGGING MATERIALS	FROM	TO	PLUGGING MATERIALS																																													
21'2"	3'6"	BLEACH/SAND																																																
3'6"	2'6"	BENTONITE																																																
2'6"	0	CEMENT																																																
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) <u>06/18/2020</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>SC153</u> . This Water Well Record was completed on (mo/day/year) <u>06/22/2020</u> under the business name of <u>FLAX DITCHING & PUMP, LLC</u> by (signature) <u>[Signature]</u>																																																		

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.