

WATER WELL PLUGGING RECORD Form WWC-5P

KSA 82a-1212

ID NO.

MW-8

1 LOCATION OF WATER WELL: County: Saline 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"/> <u>1041 E. Iron, Salina, Kansas</u>	Fraction NE 1/4 NE 1/4 NE 1/4 NE 1/4	Section Number 13	Township Number T 14 S	Range Number 3 <input type="checkbox"/> E <input checked="" type="checkbox"/> W
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Global Positioning Systems (GPS) information:
 Latitude: 37D 50' 29.53"N (in decimal degrees)
 Longitude: 97D 35' 40.81"W (in decimal degrees)
 Elevation: 1219.25 Bolt Elevation
 Datum: ☒ WGS84, ☐ NAD83, ☐ NAD27
 Collection Method:
☐ GPS unit (Make/Model: _____)
☒ Digital Map/Photo, ☐ Topographic Map, ☒ Land Survey
 Est. Accuracy: ☒ < 3 m, ☐ 3-5 m, ☐ 5-15 m, ☐ > 15 m

2 WATER WELL OWNER: The Hurlbut Corporation RR#, St. Address, Box #: P.O. Box 308 City, State ZIP Code: Abilene, Kansas 67410	3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX: <div style="text-align: center;"> </div>
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4 DEPTH OF WELL <u>35.00</u> ft. WELL'S STATIC WATER LEVEL <u>29.91</u> ft. WELL WAS USED AS: <div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> Domestic <input type="checkbox"/> Irrigation <input type="checkbox"/> Feedlot <input type="checkbox"/> Industrial </div> <div> <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> <input type="checkbox"/> Dewatering <input checked="" 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"/>
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5 TYPE OF BLANK CASING USED:

☐ Steel
☒ PVC

☐ RMP (SR)
☐ ABS

☐ Wrought
☐ Asbestos-Cement

☐ Fiberglass
☐ Concrete Tile

☐ Other (Specify below) _____

 Blank casing diameter 2 in. Was casing pulled? Yes ☐ No ☒ If yes, how much _____
 Casing height above or below land surface ~ 2.0 in.

6 GROUT PLUG MATERIAL: ☐ Neat cement ☐ Cement grout ☒ Bentonite ☐ Other _____
 Grout Plug Intervals: From 0.00 ft. to 35.00 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)
Former Fuel Storage
 Direction from well? South
 How many feet? 220

FROM	TO	PLUGGING MATERIALS	FROM	TO	PLUGGING MATERIALS
0.00	35.00	Bentonite Chips			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) October 3, 2018 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. N/A. This Water Well Record was completed on (mo/day/year) 10/04/18 under the business name of Quad State Services, Inc. by (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>.