

WATER WELL PLUGGING RECORD

FORM WWC-5P

KSA 82a-1212

1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number																																
County: Scott	NW 1/4 NE 1/4 SW 1/4	5	17	32 W																																
Distance and direction from nearest town or city street address of well if located within city? 7 Miles north of Scott city—1 mile east—1/4 north—east into																																				
2 WATER WELL OWNER: Bill Zanobia																																				
RR#, St. Address, Box # 1510 e Rd 240																																				
City, State, ZIP Code : Scott City, KS 67861																																				
Board of Agriculture, Division of Water Resources Application Number: 20080082																																				
3 MARK WELL'S LOCATON WITH AN "X" IN SECTION BOX:	4 DEPTH OF WELL 220 ft.																																			
<div style="text-align: center;">N</div> <table border="1" style="margin: auto; border-collapse: collapse;"> <tr> <td style="width: 50px; height: 50px;"></td> <td style="width: 50px; height: 50px;"></td> </tr> <tr> <td style="text-align: center;">NW</td> <td style="text-align: center;">NE</td> </tr> <tr> <td style="text-align: center;">SW</td> <td style="text-align: center;">SE</td> </tr> </table> <div style="text-align: center;">S</div> <div style="position: relative; width: 100px; height: 100px; margin: 10px auto;"> W E N S </div>			NW	NE	SW	SE	WELL'S STATIC WATER LEVEL 175 ft.																													
	NW	NE																																		
	SW	SE																																		
WELL WAS USED AS:																																				
<div style="display: flex; justify-content: space-between;"> <div> 1 Domestic 2 Irrigation 3 Feedlot 4 Industrial </div> <div> 5 Public Water Supply 6 Oil Field Water Supply 7 Lawn and Garden (domestic) 8 </div> <div> 9 Dewatering 10 Monitoring Well 11 Injection Well 12 Other </div> </div>																																				
Was a chemical/bacteriological sample submitted to Department? Yes _____ No X If yes, mo/day/yr sample was submitted _____ Water Well Disinfected: Yes X No _____																																				
5 TYPE OF BLANK CASING USED:																																				
1 Steel 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (specify below) 2 PVC 4 ABC 6 Asbestos-Cement 8 Concrete Tile																																				
Blank casing diameter 4.5 in. Was casing pulled? Yes _____ No X If yes, how much _____																																				
Casing height above or below land surface -36 in.																																				
6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other _____																																				
Grout Plug Intervals From 5 ft. to 11 ft. From 169 ft. to 175 ft. From _____ ft. 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 5 Cess Pool 10 Livestock pens 15 Oil well/ Gas well																																				
Direction from well? _____ How many feet? _____																																				
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7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/yr) 9/10/10 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 554783 This Water Well Record was completed on (mo/day/yr) 9/13/10 under the business name of Woofter Pump & Well Inc. by (signature) <i>[Signature]</i>																																				
INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment, Bureau of Water, Topeka, Kansas 66620-0001. Telephone: 785-296-3565. Send one to Water Well Owner and retain one for your records.																																				