| WATER WELL PLUGGING RECORD Form WWC-5P KSA 82a-1212 ID NO. | | | |
|--------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------|--|
| 1 | County: W 1 () + / T A Fraction | Section Number Township Number Range Number 7T & 35 E | |
| | Street/Rural Address of Well Location; if unknown, distance & | Global Positioning Systems (GPS) information: | |
| | direction from nearest town or intersection: If at owner's address, | Latitude: (in decimal degrees) Longitude: (in decimal degrees) | |
| | check here | Elevation: | |
| | | Datum: WGS84, NAD83, NAD27 | |
| - | Willes Family 120 Pedanship | Collection Method: | |
| 2 | WATER WELL OWNER: 111 N. Jones St | GPS unit (Make/Model: | |
| | iden, St. Fiddiess, Box II. | ☐ Digital Map/Photo, ☐ Topographic Map, ☐ Land Survey | |
| <u> </u> | E 17 K 5 8 1001 | Est. Accuracy: □ <3 m, □ 3-5 m, □ 5-15 m, □ > 15 m | |
| 3 | MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX: 4 DEPTH OF WELL WELL'S STATIC W. | | |
| | N . | ATER LEVEL O, O ft | |
| | WELL WAS USED A | iS: | |
| | NW NE Domestic | Public Water Supply Dewatering | |
| ١., | Irrigation | Oil Field Water Supply Monitoring | |
| \ \ | W E Feedlot | Domestic (Lawn & Garden) Injection Well | |
| | SW SE Industrial | ☐ Air Conditioning ☐ Other | |
| | Was a chemical/bacter | iological sample submitted to Department? Yes No | |
| 5 | 5 TYPE OF BLANK CASING USED: | | |
| | Steel RMP (SR) Wrought I | Fiberglass Other (Specify below) | |
| | TSteel RMP (SR) Wrought Fiberglass Other (Specify below) PVC ABS Concrete Tile | | |
| | Blank casing diameter 10 in. Was casing pulled? Yes No I If yes, how much 50 | | |
| | Casing height above or below land surface in. | | |
| | | | |
| 0 | 6 GROUT PLUG MATERIAL: Neat cement Cement grout Bentonite Other | | |
| | Grout Plug Intervals: From 175 ft. to 30 ft., From 30 ft. to 7 ft., From 7 ft. to 3 ft. | | |
| | What is the nearest source of possible contamination: | | |
| | Septic tank Seepage pit Fuel storage Other (specify below) | | |
| | Sewer lines Watertight sewer lines Sewage lagoon Sewage lagoon Insecticide storage | | |
| | Lateral lines Feedyard Abandoned water well Direction from well? | | |
| | Cess pool Livestock pens Oil well/Gas well How many feet? 2 > 0 0 /- | | |
| | EDOM TO DIVICODIC MATERIALS | | |
| | FROM TO PLUGGING MATERIALS | FROM TO PLUGGING MATERIALS | |
| | | | |
| | 7 3 Bentonite | | |
| | 3 0 put | | |
| 1 | 3 0 12004 | | |
| | | | |
| | | | |
| 7 | 7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was | | |
| cor | completed on (mo/day/year) 1/-/6 -/7 and this record is true to the best of my knowledge and belief. Kansas Water | | |
| | ell Contractor's License No. | Record was completed on (mo/day/year) /// -/ (6-1) under the | |
| business name of Jones courtes en by (signature) Weif chuflenge | | | |
| 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: 785/296-5524. Send one to Water Well Owner and retain one for your | | | |
| records. Visit us at http://www.kdheks.gov/waterwell/index.html. | | | |