

Improvement

WATER WELL PLUGGING RECORD

Form WWC-5P

KSA 82a-1212

ID NO. _____

1	LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: <u>Lyon</u>	<u>NE</u> _{1/4} <u>1/4</u> <u>1/4</u>	<u>5</u> <u>4</u>	<u>18</u>	<u>10</u>	<u>E/W</u>

Distance and direction from nearest town or city street address of well if located within city?
From Americus One mile North To Rd 250 Then Two mile West

2 WATER WELL OWNER: Matthew L. Dobbs
 RR #, St. Address, Box #: 2481 Road D
 City, State, ZIP Code: Americus KS 66835
 Board of Agriculture, Division of Water Resources
 Application Number: _____

3	MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4	DEPTH OF WELL <u>21</u> ft.
		WELL'S STATIC WATER LEVEL <u>13</u> ft.	
		WELL WAS USED AS: <input checked="" type="checkbox"/> 1 Domestic 5 Public Water Supply 9 Dewatering <input type="checkbox"/> 2 Irrigation 6 Oil Field Water Supply 10 Monitoring Well <input type="checkbox"/> 3 Feedlot 7 Domestic (Lawn & Garden) 11 Injection Well <input type="checkbox"/> 4 Industrial 8 Air Conditioning 12 Other	
Was a chemical / bacteriological sample submitted to Department? Yes No <input checked="" type="checkbox"/> If yes, mo/day/yr sample was submitted Water Well Disinfected: Yes <input checked="" type="checkbox"/> No			

5 TYPE OF BLANK CASING USED: None Used Hand Dig Rock Wells

1 Steel	3 RMP (SR)	5 Wrought	7 Fiberglass	9 Other (Specify below)
2	4 ABS	6 Asbestos-Cement	8 Concrete Tile	

Blank casing diameter 1 1/2 in. Was casing pulled? Yes No If yes, how much
 Casing height above or below land surface in.

6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other

Grout Plug Intervals: From 2.5 ft. to 4.5 ft. From ft. to ft., From 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	<input checked="" type="checkbox"/> 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? Southwest How many feet? 400 ft

FROM	TO	PLUGGING MATERIALS
16	16.5	15 Bags Bentonite
<u>21</u>	<u>13</u>	<u>Rock gravel</u>
<u>13</u>	<u>5</u>	<u>Subsoil</u>
<u>5</u>	<u>4.5</u>	<u>bentonite</u>
<u>4.5</u>	<u>0</u>	<u>Top soil</u>

7 CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 3/17/2009 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 business name of _____ by (signature) [Signature]

INSTRUCTIONS: Use typewriter or ball point 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.