

WATER WELL PLUGGING RECORD

FORM WWC-5P

KSA 82a-1212

<b>1</b> LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: <b>Lane</b>	<b>SE</b> 1/4 <b>NE</b> 1/4 <b>NE</b> 1/4	<b>23</b>	<b>18</b>	<b>30 W</b>

Distance and direction from nearest town or city street address of well if located within city?

**2** WATER WELL OWNER: **Cleo B Harris f/k/a Cleo B Shull**  
 RR#, St. Address, Box # **4917 Ravenswood Drive, Apt #1309** Board of Agriculture, Division of Water Resources  
 City, State, ZIP Code : **San Antonio, TX 78227** Application Number: 20100516

<p><b>3</b> MARK WELL'S LOCATON WITH AN "X" IN SECTION BOX:</p> <div style="text-align: center;"> </div>	<p><b>4</b> DEPTH OF WELL ..... <b>111</b> ..... ft.</p> <p>WELL'S STATIC WATER LEVEL ..... <b>90</b> ..... ft.</p> <p>WELL WAS USED AS:</p> <table style="width:100%;"> <tr> <td>1 Domestic</td> <td>5 Public Water Supply</td> <td>9 Dewatering</td> </tr> <tr> <td>2 Irrigation</td> <td><input checked="" type="checkbox"/> 6 Oil Field Water Supply</td> <td>10 Monitoring Well</td> </tr> <tr> <td>3 Feedlot</td> <td>7 Lawn and Garden (domestic)</td> <td>11 Injection Well</td> </tr> <tr> <td>4 Industrial</td> <td>8</td> <td>12 Other .....</td> </tr> </table> <p>Was a chemical/bacteriological sample submitted to Department? Yes ____ No <b>X</b></p> <p>If yes, mo/day/yr sample was submitted .....</p> <p>Water Well Disinfected: Yes <b>X</b> No .....</p>	1 Domestic	5 Public Water Supply	9 Dewatering	2 Irrigation	<input checked="" type="checkbox"/> 6 Oil Field Water Supply	10 Monitoring Well	3 Feedlot	7 Lawn and Garden (domestic)	11 Injection Well	4 Industrial	8	12 Other .....
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4 Industrial	8	12 Other .....											

**5** TYPE OF BLANK CASING USED:

1 Steel	3 RMP (SR)	5 Wrought	7 Fiberglass	9 Other (specify below)
<input checked="" type="checkbox"/> 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 **3** ft. to **6** ft. From **87** ft. to **90** 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? .....

FROM	TO	CODE	PLUGGING MATERIALS
<b>111</b>	<b>90</b>		<b>Chlorinated Sand</b>
<b>90</b>	<b>87</b>		<b>Bentonite</b>
<b>87</b>	<b>6</b>		<b>Native clay</b>
<b>6</b>	<b>3</b>		<b>Bentonite</b>
<b>3</b>	<b>0</b>		<b>Native clay</b>

**7** CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/yr) **7/20/11** and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **554** This Water Well Record was completed on (mo/day/yr) **8-2-11** under the business name of **Woofter Pump & Well Inc.** by (signature) *[Signature]*

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.