

WATER WELL PLUGGING RECORD

Form WWC-5P

KSA 82a-1212

ID No.

VE-7

1 LOCATION OF WATER WELL:	Fraction NW $\frac{1}{4}$ NE $\frac{1}{4}$ SE $\frac{1}{4}$	Section Number 31	Township Number 19S	Range Number 11W																																
County: Barton																																				
Distance and direction from nearest town or city street address of well if located within city? 307 E. Santa Fe, Ellinwood, KS																																				
2 WATER WELL OWNER: Garvey International, Inc.																																				
RR#, St. Address, Box # 2560 Foxfield Rd																																				
City, State, ZIP Code St. Charles, IL 60174																																				
Board of Agriculture, Division of Water Resources Application Number:																																				
3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF WELL 11 ft.																																		
N X <table border="1" style="margin: auto; border-collapse: collapse;"> <tr><td></td><td></td><td></td></tr> <tr><td>NW</td><td></td><td>NE</td></tr> <tr><td>SW</td><td></td><td>SE</td></tr> </table> S W E					NW		NE	SW		SE	WELL'S STATIC WATER LEVEL _____ ft.																									
		NW		NE																																
		SW		SE																																
WELL WAS USED AS:																																				
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Was a chemical/bacteriological sample submitted to Department? Yes _____ No _____																																				
If yes, mo/day/yr sample was submitted _____																																				
Water Well Disinfected: Yes _____ No _____																																				
5 TYPE OF BLANK CASING USED:																																				
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Blank casing diameter 2 in. Was casing pulled? Yes x No if yes, how much 3 feet																																				
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 _____ ft. to _____ ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.																																				
What is the nearest source of possible contamination:																																				
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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) 2/16/11 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 3/1/11 under the business name of Bluestem Environmental Engineering, Inc.																																				
by (signature) <i>Nick Holt</i>																																				
INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment, Bureau of Water, 1000 S W Jackson St., Ste. 420, Topeka, Kansas 66620-0001. Telephone: 785-296-3585. Send one to Water Well Owner and retain one for your records.																																				