

WATER WELL PLUGGING RECORD

Form WWC-5P

KSA 82a-1212

ID No. 00091839

1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number																				
County: Barton	SW ¼ SE ¼ SW ¼	28	19	13 W																				
Distance and direction from nearest town or city street address of well if located within city? 2302 10th Street, Great Bend																								
2 WATER WELL OWNER:		Mr. Fred Schmidt																						
RR#, St. Address, Box #		2303 10 th Street																						
City, State, ZIP Code :		Great Bend, KS 67536																						
		Board of Agriculture, Division of Water Resources Application Number:																						
3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4 DEPTH OF WELL 13.55 ft.																							
N <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="width: 50px; height: 50px;"></td> <td style="width: 50px; height: 50px;"></td> </tr> <tr> <td style="text-align: center;">SW</td> <td style="text-align: center;">SE</td> </tr> </table> S W E S N X			NW	NE			SW	SE	WELL'S STATIC WATER LEVEL 9.50 ft. WELL WAS USED AS: <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>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 Air Conditioning</td> <td>12 Other</td> </tr> </table>				1 Domestic	5 Public Water Supply	9 Dewatering	2 Irrigation	6 Oil Field Water Supply	10 Monitoring Well	3 Feedlot	7 Lawn and Garden (domestic)	11 Injection Well	4 Industrial	8 Air Conditioning	12 Other
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Was a chemical/bacteriological sample submitted to Department? Yes ___ No X																								
If yes, mo/day/yr sample was submitted _____																								
Water Well Disinfected: Yes ___ No X																								
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 2 in. Was casing pulled? Yes ___ No X If yes, how much _____																								
Casing height above or below land surface 0.0 in. Overdrilled to 15 feet below ground surface																								
6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other _____																								
Grout Plug Intervals From 1 ft. to 7.25 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? _____																						
FROM	TO	CODE	PLUGGING MATERIALS																					
0	0.5		Soil																					
0.5	7.25		Bentonite 250 lbs																					
7.25	15		Caved in - Sand																					
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/yr) 1-31-05 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 531 This Water Well Record was completed on (mo/day/yr) 2-11-05 under the business name of Geotechnical Services, 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, 1000 S W Jackson St., Ste. 420, Topeka, Kansas 66620-0001. Telephone: 785-296-3565. Send one to Water Well Owner and retain one for your records.																								