

WATER WELL PLUGGING RECORD

Form WWC-5P

KSA 82a-1212

ID No. 0106805

1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: Barton	SE 1/4 NE 1/4 SW 1/4	28	19	13 W
Distance and direction from nearest town or city street address of well if located within city? 1410 Williams, Great Bend, KS				

2 WATER WELL OWNER:	Former Parish Motors	Board of Agriculture, Division of Water Resources Application Number:
RR#, St. Address, Box #	1410 Williams	
City, State, ZIP Code :	Great Bend, KS	

3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4 DEPTH OF WELL 23.39 ft.
	WELL'S STATIC WATER LEVEL 17.74 ft.
	WELL WAS USED AS:
	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
	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 240 in. Overdrilled from 0 to 20 ft. below ground surface				

6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other _____				
Grout Plug Intervals From 3 ft. to 23.39 ft. From _____ ft. to _____ 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
0	3		Concrete
3	23.39		Bentonite

7	CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/yr) 5-9-05 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) 5-26-05 under the business name of Geotechnical Services, Inc. by (signature) <i>[Signature]</i>
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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.