**GSI Job No. 057127** **MW-1**

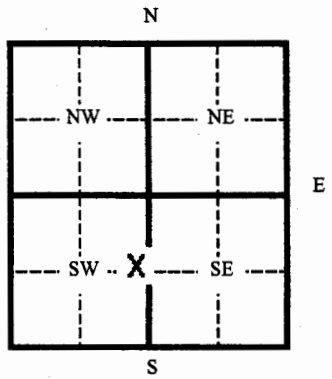
WATER WELL PLUGGING RECORD Form WWC-5P KSA 82a-1212 ID No. **0106891**

| 1 LOCATION OF WATER WELL: | Fraction | Section Number | Township Number | Range Number |
|---|---|---|---|---|
| County: **Barton** | **SE ¼ NE ¼ SW ¼** | **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**
RR#, St. Address, Box # **1410 Williams** Board of Agriculture, Division of Water Resources
City, State, ZIP Code : **Great Bend, KS** Application Number:

3 MARK WELL'S LOCATON WITH AN "X" IN SECTION BOX:




4 DEPTH OF WELL **20.41** ft.

WELL'S STATIC WATER LEVEL **18.32** 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 **0.0** in. **Overdrilled from 0 to 20.5 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 **20.5** 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 | 20.5 | | 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)

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.

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