GSI Job No. 047375 **SS-5**

WATER WELL PLUGGING RECORD Form WWC-5P KSA 82a-1212 ID No. **00099130**

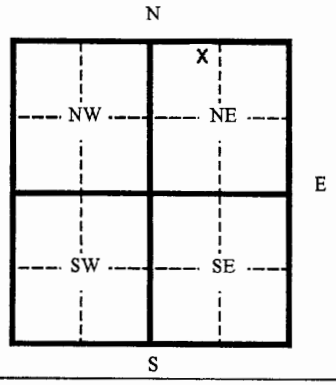
1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: **Barton**	**NE ¼ NW ¼ NE ¼**	**33**	**19**	**13 W**

Distance and direction from nearest town or city street address of well if located within city?
1600 10th Street, Great Bend

2 WATER WELL OWNER: **Sanko Service**
RR#, St. Address, Box # **1600 10th Street**
City, State, ZIP Code : **Great Bend, KS 67530**

Board of Agriculture, Division of Water Resources
Application Number:

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



4 DEPTH OF WELL **15** ft.

WELL'S STATIC WATER LEVEL **10.69** 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 X No ___ If yes, how much **15 ft.**

Casing height above or below land surface **0.0** in. **Overdrilled to 15 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 **10.5** 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**		**Soil**
3	**10.5**		**Bentonite**
10.5	**15**		**Native Soil – boring caved**

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/yr) **8-4-05** 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) **8-29-05** 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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