

WATER WELL PLUGGING RECORD Form WWC-5P

KSA 82a-1212 ID NO.

89128

1 LOCATION OF WATER WELL: County: Barton	Fraction SE ¼ SE ¼ SE ¼ ¼	Section Number 29	Township Number T 19 S	Range Number 13 ☐ E ☒ W
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Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here ☐
NE Corner of 10th & Jefferson Sts., Great Bend, KS

Global Positioning Systems (GPS) information:
 Latitude: _____ (in decimal degrees)
 Longitude: _____ (in decimal degrees)
 Elevation: _____
 Datum: ☐ WGS84, ☐ NAD83, ☐ NAD27
 Collection Method:
☐ GPS unit (Make/Model: _____)
☐ Digital Map/Photo, ☐ Topographic Map, ☐ Land Survey
 Est. Accuracy: ☐ < 3 m, ☐ 3-5 m, ☐ 5-15 m, ☐ > 15 m

2 WATER WELL OWNER: Midtown Service RR#, St. Address, Box #: 4000 10th St. City, State ZIP Code: Great Bend, KS 67530	3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX: N <table border="1" style="margin: auto; border-collapse: collapse;"> <tr> <td style="padding: 5px;">NW</td> <td style="padding: 5px;">NE</td> </tr> <tr> <td style="padding: 5px;">SW</td> <td style="padding: 5px;">SE</td> </tr> </table> W E S	NW	NE	SW	SE
NW	NE				
SW	SE				

4 DEPTH OF WELL 15 ft.
 WELL'S STATIC WATER LEVEL _____ ft.
 WELL WAS USED AS:

☐ Domestic	☐ Public Water Supply	☐ Dewatering
☐ Irrigation	☐ Oil Field Water Supply	☒ Monitoring
☐ Feedlot	☐ Domestic (Lawn & Garden)	☐ Injection Well
☐ Industrial	☐ Air Conditioning	☐ Other _____

 Was a chemical/bacteriological sample submitted to Department? Yes ☐ No ☐

5 TYPE OF BLANK CASING USED:

☒ Steel	☐ RMP (SR)	☐ Wrought	☐ Fiberglass	☐ Other (Specify below) _____
☒ PVC	☐ ABS	☐ Asbestos-Cement	☐ Concrete Tile	

 Blank casing diameter 2 in. Was casing pulled? Yes ☒ No ☐ If yes, how much ~3ft below ground surface
 Casing height above or below land surface _____ in.

6 GROUT PLUG MATERIAL: ☐ Neat cement ☐ Cement grout ☒ Bentonite ☐ Other _____
 Grout Plug Intervals: From 3 ft. to 15 ft., From _____ ft. to _____ ft., From _____ to _____ ft.
 What is the nearest source of possible contamination:

☐ Septic tank	☐ Seepage pit	☐ Fuel Storage	☐ Other (specify below) _____
☐ Sewer lines	☐ Pit privy	☐ Fertilizer storage	
☐ Watertight sewer lines	☐ Sewage lagoon	☐ Insecticide storage	
☐ Lateral lines	☐ Feedyard	☐ Abandoned water well	Direction from well? _____
☐ Cess pool	☐ Livestock pens	☐ Oil well/Gas well	How many feet? _____

FROM	TO	PLUGGING MATERIALS	FROM	TO	PLUGGING MATERIALS
3	15	Bentonite			
					M-14

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 7/20/2014 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. _____. This Water Well Record was completed on (mo/day/year) 7/31/2014 under the business name of GreenField Contractors, Inc. by (signature) Melissa D. Melrose

INSTRUCTIONS: Use typewriter or ballpoint pen. Please press firmly and print clearly. Please fill in blanks, underline or circle the correct answers. Send one copy to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Ste. 420, Topeka, Kansas 66612-1367. Telephone: 785/296-5524. Send one to Water Well Owner and retain one for your records. Visit us at <http://www.kdheks.gov/waterwell/index.html>.