

# WATER WELL PLUGGING RECORD Form WWC-5

KSA 82a-1212 ID NO.  

<b>1 LOCATION OF WATER WELL:</b> County: <u>McPherson</u>	Fraction <u>SW 1/4 NE 1/4 SE 1/4 NE 1/4</u>	Section Number <u>30</u>	Township Number <u>19 S</u>	Range Number <u>4</u> <input type="checkbox"/> E <input checked="" type="checkbox"/> W
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Street/Rural Address of Well Location; if unknown, distance and direction from nearest town or intersection. If at owner's address, check here <input type="checkbox"/>  <u>1 mi W &amp; 1/4 mi N of Conway</u>	<b>Global Positioning Systems (GPS) Information:</b> Latitude: <u>38.37180</u> (in decimal degrees) Longitude: <u>97.79735</u> (in decimal degrees) Elevation: _____ Datum: <input checked="" type="checkbox"/> WGS84 <input type="checkbox"/> NAD83 <input type="checkbox"/> NAD27 Collection Method: <input type="checkbox"/> GPS unit Make/Model: _____ <input checked="" type="checkbox"/> Digital Map/Photo <input type="checkbox"/> Topographic Map <input type="checkbox"/> Land Survey Est. Accuracy: <input type="checkbox"/> <3 m <input checked="" type="checkbox"/> 3-5 m <input type="checkbox"/> 5-15 <input type="checkbox"/> >15
<b>2 WATER WELL OWNER:</b> <u>ONEOK</u> RR#, St. Address, Box # <u>661 Highway 56</u> City, State ZIP Code <u>McPherson, KS 67460</u>	

<b>3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:</b> <div style="text-align: center;">             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>             S              W <span style="margin-left: 100px;">E</span> </div>	NW	NE	SW	SE	<b>4 DEPTH OF WELL:</b> <u>90</u> ft. WELL'S STATIC WATER LEVEL: _____ ft. WELL WAS USED AS: <div style="display: flex; flex-wrap: wrap;"> <div style="width: 33%;"><input type="checkbox"/> Domestic</div> <div style="width: 33%;"><input type="checkbox"/> Public Water Supply</div> <div style="width: 33%;"><input type="checkbox"/> Dewatering</div> <div style="width: 33%;"><input type="checkbox"/> Irrigation</div> <div style="width: 33%;"><input type="checkbox"/> Old Field Water Supply</div> <div style="width: 33%;"><input checked="" type="checkbox"/> Monitoring</div> <div style="width: 33%;"><input type="checkbox"/> Feedlot</div> <div style="width: 33%;"><input type="checkbox"/> Domestic (Lawn/Garden)</div> <div style="width: 33%;"><input type="checkbox"/> Injection Well</div> <div style="width: 33%;"><input type="checkbox"/> Industrial</div> <div style="width: 33%;"><input type="checkbox"/> Air Conditioning</div> <div style="width: 33%;"><input type="checkbox"/> Other _____</div> </div> Was a chemical/bacteriological sample submitted to Department? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
NW	NE				
SW	SE				

**5 TYPE OF BLANK CASING USED:**

<input checked="" type="checkbox"/> Steel	<input type="checkbox"/> RMP (SR)	<input type="checkbox"/> Wrought	<input type="checkbox"/> Fiberglass	<input type="checkbox"/> Other: _____
<input type="checkbox"/> PVC	<input type="checkbox"/> ABS	<input type="checkbox"/> Asbestos/Cement	<input type="checkbox"/> Concrete Tile	

Blank casing diameter: 5 in. Was casing pulled? ☒ Yes ☐ No If Yes, how much 35'

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 35 ft. From 35 ft. To 90 ft. From \_\_\_\_\_ ft. To \_\_\_\_\_ ft.

What is the nearest source of possible contamination:

<input type="checkbox"/> Septic tank	<input type="checkbox"/> Seepage pit	<input type="checkbox"/> Fuel storage	<input type="checkbox"/> Other (specify below): _____
<input type="checkbox"/> Sewer lines	<input type="checkbox"/> Pit privy	<input type="checkbox"/> Fertilizer storage	
<input type="checkbox"/> Watertight sewer lines	<input type="checkbox"/> Sewage lagoon	<input type="checkbox"/> Insecticide storage	
<input type="checkbox"/> Lateral lines	<input type="checkbox"/> Feedyard	<input type="checkbox"/> Abandoned water well	Direction from well: <u>SW</u>
<input type="checkbox"/> Cess pool	<input type="checkbox"/> Livestock pens	<input checked="" type="checkbox"/> Oil well/Gas well	How many feet: <u>41</u>

FROM	TO	PLUGGING MATERIAL	FROM	TO	PLUGGING MATERIAL
0	3	Native Clay (12.5" dia.)			
3	35	Cement grout (12.5" dia.)			
35	90	Neat cement (5" dia.)			OB-12A

**7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:** This water well was plugged under my jurisdiction and was completed on (mo/day/year) 6/26/2013 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 527. This Water Well Record was completed on (mo/day/year) 7/10/2013 under the business name of GeoCore Inc. by (signature) [Signature]

**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>.