

WATER WELL PLUGGING RECORD Form WWC-5P KSA 82a-1212 ID NO.

1 LOCATION OF WATER WELL: County: Republic	Fraction $\frac{1}{4}$ NE $\frac{1}{4}$ SE $\frac{1}{4}$	Section Number 2	Township Number T1S	Range Number R3 EW
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Distance and direction from nearest town or city street address of well if located within city?

Approx. 1 mile south of Chester, NE

2 WATER WELL OWNER: Republic Co. RWD #2 RR#, St. Address, Box #: PO Box 501 City, State ZIP Code: Belleville, KS 66935	Global Positioning Systems (decimal degrees, min. of 4 digits) Latitude: 39° 59' 34.7" Longitude: 097° 36' 47.7" Elevation: _____ Datum: _____ Data Collection Method: Hand Held
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3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX: <div style="text-align: center;"> </div>	4 DEPTH OF WELL 183 ft. WELL'S STATIC WATER LEVEL 132 ft. WELL WAS USED AS: <table> <tr> <td>1 Domestic</td> <td>5 Public Water Supply</td> <td>9 Dewatering</td> </tr> <tr> <td>2 Irrigation</td> <td>6 Oil Field Water Supply</td> <td>10 Monitoring</td> </tr> <tr> <td>3 Feedlot</td> <td>7 Domestic (Lawn & Garden)</td> <td>11 Injection Well</td> </tr> <tr> <td>4 Industrial</td> <td>8 Air Conditioning</td> <td>12 Other Test well</td> </tr> </table> Was a chemical/bacteriological sample submitted to Department? Yes _____ No X	1 Domestic	5 Public Water Supply	9 Dewatering	2 Irrigation	6 Oil Field Water Supply	10 Monitoring	3 Feedlot	7 Domestic (Lawn & Garden)	11 Injection Well	4 Industrial	8 Air Conditioning	12 Other Test well
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5 TYPE OF BLANK CASING USED:			
1 Steel	3 RMP (SR)	5 Wrought	7 Fiberglass
2 PVC	4 ABS	6 Asbestos-Cement	8 Concrete Tile
9 Other (Specify below) _____			
Blank casing diameter 5 in. Was casing pulled? Yes _____ No X If yes, how much _____			
Casing height above or below land surface 12 in.			

6 GROUT PLUG MATERIAL:	1 Neat cement	2 Cement grout	3 Bentonite	4 Other _____
Grout Plug Intervals: From 5 ft. to 6 ft., From 6 ft. to 136 ft., From _____ 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	Direction from well? South	
5 Cess pool	10 Livestock pens	15 Oil well/Gas well	How many feet? 500'	

FROM	TO	PLUGGING MATERIALS	FROM	TO	PLUGGING MATERIALS
0'	5'	Native soil			
5'	6'	Bentonite cap			
6'	136'	Bentonite seal			
136'	183'	Chlorinated gravel			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 2-24-09 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 755 . This Water Well Record was completed on (mo/day/year) 3-27-09 under the business name of Sargent Drilling by (signature)
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INSTRUCTIONS: Use typewriter or ballpoint pen. Please press firmly and print clearly. Please fill in blanks, underline or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Ste. 420, Topeka, Kansas 66612-1367. Telephone: 785/296-5522. Send one to Water Well Owner and retain one for your records. Visit us at <http://www.kdheks.gov/geo/waterwells>.