

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

1 **LOCATION OF WATER WELL:** Fraction $\frac{1}{4}$ $\frac{1}{4}$ C $\frac{1}{4}$ SE $\frac{1}{4}$ Section Number 26 Township Number T 20 S Range Number 14 ☐ E ☒ W

Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here ☐ 6S, 4W of Great Bend, KS

Global Positioning Systems (GPS) information:

Latitude: _____ (in decimal degrees)

Longitude: _____ (in decimal degrees)

Elevation: _____

Horizontal Datum: ☐ WGS84, ☐ NAD83, ☐ NAD27

Collection Method: _____

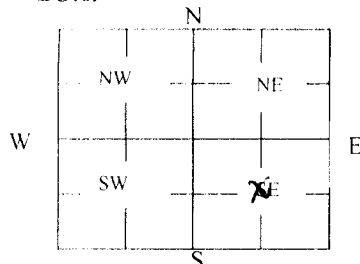
2 **WATER WELL OWNER:** Bruce Tomlinson Rev. Trust
RR#: St. Address, Box #: 314 SW 50 Road c/o T R Esfeld
City, State ZIP Code: Great Bend, KS 67530

☐ GPS unit (Make/Model: _____)

☐ Digital Map/Photo, ☐ Topographic Map, ☐ Land Survey

Est. Accuracy: ☐ < 3 m, ☐ 3-5 m, ☐ 5-15 m, ☐ > 15 m

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



4 **DEPTH OF WELL** 59 **ft.**

WELL'S STATIC WATER LEVEL 14 **ft**

WELL WAS USED AS:

☒ Domestic
☐ Irrigation
☐ Feedlot
☐ Industrial

☐ Public Water Supply
☐ Oil Field Water Supply
☐ Domestic (Lawn & Garden)
☐ Air Conditioning

☐ Dewatering
☐ Monitoring
☐ Injection Well
☐ 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 4 **in.** Was casing pulled? Yes ☐ No ☒ If yes, how much _____
Casing height above or below land surface 3 **ft. below** in.

6 **GROUT PLUG MATERIAL:** ☐ Neat cement ☐ Cement grout ☒ Bentonite ☐ Other _____

Grout Plug Intervals: From 3 **ft.** to 14 **ft.**, From _____ **ft.** to _____ **ft.**, From _____ **ft.** 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 ☐ none - in field
☐ 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
59	14	gravel			
14	3	bentonite			
3	0	top soil			

7 **CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:** This water well was plugged under my jurisdiction and was completed on (mo/day/year) 6/19/17 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 186. This Water Well Record was completed on (mo/day/year) 6/28/17 under the business name of Kelly's Water Well Service, Inc. by (signature) *Kathryn L. Good*

Send one white copy to Kansas Department of Health & Environment, Geology Section, 1000 SW Jackson Street, Ste. 420, Topeka, KS 66612-1367. Send one copy to WATER WELL OWNER and retain one for your records.

Visit us at <http://www.kdheks.gov/waterwell/index.html> Telephone 785-296-5524.