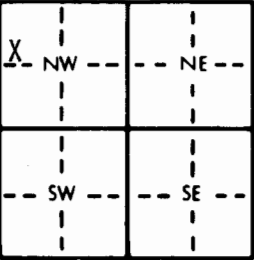


## WATER WELL RECORD

Form WWC-5

KSA 82a-1212

## PLUGGING REPORT

1 LOCATION OF WATER WELL: County: <b>McPherson</b>		Fraction <b>SW 1/4 NW 1/4 NW 1/4</b>		Section Number <b>07</b>	Township Number <b>T 21 S</b>	Range Number <b>R 3 E</b>																																				
Distance and direction from nearest town or city street address of well if located within city? <b>4 miles east and 3/4 mile north of Inman, Kansas</b>																																										
2 WATER WELL OWNER: <b>John Reimer</b> RR#, St. Address, Box # : <b>RR#1</b> City, State, ZIP Code : <b>Inman, KS 67546</b>				Board of Agriculture, Division of Water Resources Application Number: <b>N/A</b>																																						
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: <div style="text-align: center;">  </div>		4 DEPTH OF COMPLETED WELL <b>95</b> ft. ELEVATION: Depth(s) Groundwater Encountered <b>1. 47.2</b> ft. <b>2.</b> ft. <b>3.</b> ft. WELL'S STATIC WATER LEVEL <b>47.2</b> ft. below land surface measured on mo/day/yr <b>04/13/92</b> Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm Est. Yield _____ gpm: Well water was _____ ft. after _____ hours pumping _____ gpm Bore Hole Diameter _____ in. to _____ ft., and _____ in. to _____ ft. WELL WATER <del>WAS</del> USED AS: 5 Public water supply 8 Air conditioning 11 Injection well <input checked="" type="checkbox"/> 1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below) 2 Irrigation 4 Industrial 7 Lawn and garden only 10 Monitoring well Was a chemical/bacteriological sample submitted to Department? Yes _____ No _____; If yes, mo/day/yr sample was submitted _____ Water Well Disinfected? Yes _____ No _____																																								
5 TYPE OF BLANK CASING USED: <input checked="" type="checkbox"/> 1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued _____ Clamped _____ 2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded _____ Blank casing diameter <b>2</b> in. to <b>95</b> ft., Dia <b>6</b> in. to <b>42</b> ft., Dia _____ in. to _____ ft. Casing height above land surface <b>7</b> ft. below <b>16</b> lb., weight _____ lbs./ft. Wall thickness or gauge No. _____ TYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel 3 Stainless steel 5 Fiberglass 7 PVC 10 Asbestos-cement 2 Brass 4 Galvanized steel 6 Concrete tile 8 RMP (SR) 11 Other (specify) <b>N/A</b> SCREEN OR PERFORATION OPENINGS ARE: 1 Continuous slot 3 Mill slot 5 Gauzed wrapped 8 Saw cut 11 None (open hole) 2 Louvered shutter 4 Key punched 6 Wire wrapped 9 Drilled holes 7 Torch cut 10 Other (specify) <b>N/A</b> SCREEN-PERFORATED INTERVALS: From <b>N/A</b> ft. to <b>N/A</b> ft., From _____ ft. to _____ ft. GRAVEL PACK INTERVALS: From _____ ft. to _____ ft., From _____ ft. to _____ ft.																																										
6 GROUT MATERIAL: 1 Neat cement <input checked="" type="checkbox"/> 2 Cement grout <input checked="" type="checkbox"/> 3 Bentonite Hole Plug Grout Intervals: From <b>95</b> ft. to <b>7</b> ft., From <b>42</b> ft. to <b>7</b> ft., From _____ ft. to _____ ft. What is the nearest source of possible contamination: 1 Septic tank 4 Lateral lines 7 Pit privy <input checked="" type="checkbox"/> 11 Fuel storage 14 Abandoned water well 2 Sewer lines 5 Cess pool 8 Sewage lagoon 12 Fertilizer storage 15 Oil well/Gas well 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 13 Insecticide storage 16 Other (specify below) Direction from well? <b>southeast</b> How many feet? <b>100</b>																																										
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>FROM</th> <th>TO</th> <th>LITHOLOGIC LOG</th> <th>FROM</th> <th>TO</th> <th>PLUGGING INTERVALS</th> </tr> </thead> <tbody> <tr> <td></td> <td></td> <td>2" Casing</td> <td>30</td> <td>7</td> <td>Cement</td> </tr> <tr> <td></td> <td></td> <td></td> <td>95</td> <td>30</td> <td>Bentonite HolePlug</td> </tr> <tr> <td></td> <td></td> <td>6" Casing</td> <td>42</td> <td>7</td> <td>Cement</td> </tr> <tr> <td colspan="6">Well was located in storm cellar. A 2 ft. diam. by 6 in. cap of cement was installed on the well. The plugging was witnessed by Michael T. Dealy, Equus Beds Groundwater Management District No.2</td> </tr> <tr> <td></td> <td></td> <td></td> <td>95</td> <td>7</td> <td>Cement</td> </tr> </tbody> </table>							FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS			2" Casing	30	7	Cement				95	30	Bentonite HolePlug			6" Casing	42	7	Cement	Well was located in storm cellar. A 2 ft. diam. by 6 in. cap of cement was installed on the well. The plugging was witnessed by Michael T. Dealy, Equus Beds Groundwater Management District No.2									95	7	Cement
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7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was <input checked="" type="checkbox"/> constructed, <input checked="" type="checkbox"/> reconstructed, or <input checked="" type="checkbox"/> plugged under my jurisdiction and was completed on (mo/day/year) <b>07/24/92</b> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <b>N/A</b> This Water Well Record was completed on (mo/day/yr) <b>07/24/92</b> under the business name of <b>N/A</b> by (signature) <b>John A. Reimer</b>																																										
INSTRUCTIONS: Use typewriter or ball point 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, Topeka, Kansas 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.																																										