# WATER WELL PLUGGING RECORD    Form WWC-5P    KSA 82a-1212    ID NO. [          ]
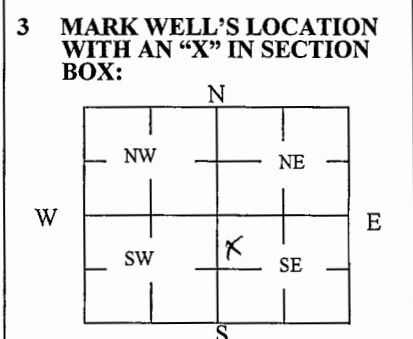
**1  LOCATION OF WATER WELL:**

| | Fraction | Section Number | Township Number | Range Number |
|---|---|---|---|---|
| County: Rice | SW ¼ SW ¼ NW ¼ SE ¼ | 21 | T 21 S | 8  ☐ E ☑ W |

Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here ☐    314 S. Broadway, Sterling, 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:** Farmers Coop Union
RR#, St. Address, Box #:    PO BOX 159
City, State ZIP Code:    Sterling, KS 67579

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

| NW | NE |
|---|---|
| SW | ✗ SE |

W — E, N — S

**4  DEPTH OF WELL** 13.50' ____ ft.

WELL'S STATIC WATER LEVE 6.45' ____ 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 MW 5

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 3 Feet
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 13.50 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 |
|---|---|---|---|---|---|
| 0 | 1 | Concrete | | | |
| 1 | 3 | Native Soils | | | |
| 3 | 13.50 | Bentonite Grout | | | MW5 |
| | | | | | |
| | | | | | |
| | | | | | |

CORRECTED

**7  CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:** This water well was plugged under my jurisdiction and was completed on (mo/day/year) 2/23/2010 _____ and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 594 _____. This Water Well Record was completed on (mo/day/year) 04/06/2010 _____ under the business name of Coranco Great Plains, Inc. _____ by (signature) _____

**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: 785/296-5524. Send one to Water Well Owner and retain one for your records. Visit us at http://www.kdheks.gov/waterwell/index.html.

Check one: ☑ White Copy  ☐ Blue Copy  ☐ Pink Copy