

WATER WELL PLUGGING RECORD

Form WWC-5P

KSA 82a-1212

ID NO.

MW-23S

1 LOCATION OF WATER WELL: County: Rice	Fraction ¼ NW ¼ NW ¼ SE ¼	Section Number 21	Township Number T 21 S	Range Number 8 <input type="checkbox"/> E <input checked="" type="checkbox"/> W
Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here <input type="checkbox"/> 102 N. Broadway, Sterling, KS		Global Positioning Systems (GPS) information: Latitude: _____ (in decimal degrees) Longitude: _____ (in decimal degrees) Elevation: _____ Horizontal Datum: <input type="checkbox"/> WGS84, <input type="checkbox"/> NAD83, <input type="checkbox"/> NAD27 Collection Method: _____		

2 WATER WELL OWNER: Don Corwin RR#, St. Address, Box #: 320 W. Washington City, State ZIP Code: Sterling, KS 67579	<input type="checkbox"/> GPS unit (Make/Model: _____) <input type="checkbox"/> Digital Map/Photo, <input type="checkbox"/> Topographic Map, <input type="checkbox"/> Land Survey Est. Accuracy: <input type="checkbox"/> < 3 m, <input type="checkbox"/> 3-5 m, <input type="checkbox"/> 5-15 m, <input type="checkbox"/> > 15 m
---	--

3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX: 	4 DEPTH OF WELL 16 ft. WELL'S STATIC WATER LEVEL _____ ft WELL WAS USED AS: <input type="checkbox"/> Domestic <input type="checkbox"/> Public Water Supply <input type="checkbox"/> Dewatering <input type="checkbox"/> Irrigation <input type="checkbox"/> Oil Field Water Supply <input checked="" type="checkbox"/> Monitoring <input type="checkbox"/> Feedlot <input type="checkbox"/> Domestic (Lawn & Garden) <input type="checkbox"/> Injection Well <input type="checkbox"/> Industrial <input type="checkbox"/> Air Conditioning Was a chemical/bacteriological sample submitted to Department? Yes <input type="checkbox"/> No <input type="checkbox"/>
---	---

5 TYPE OF BLANK CASING USED:	
<input type="checkbox"/> Steel <input checked="" type="checkbox"/> PVC	<input type="checkbox"/> RMP (SR) <input type="checkbox"/> ABS
<input type="checkbox"/> Wrought <input type="checkbox"/> Asbestos-Cement	<input type="checkbox"/> Fiberglass <input type="checkbox"/> Concrete Tile
<input type="checkbox"/> Other (Specify below) _____	
Blank casing diameter 2 in. Was casing pulled? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> If yes, how much -3 ft. below ground surface Casing height above or below land surface _____ in.	

6 GROUT PLUG MATERIAL:	<input type="checkbox"/> Neat cement	<input type="checkbox"/> Cement grout	<input checked="" type="checkbox"/> Bentonite	<input type="checkbox"/> Other _____
Grout Plug Intervals: From 3 ft. to 16 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.				
What is the nearest source of possible contamination:				
<input type="checkbox"/> Septic tank <input type="checkbox"/> Sewer lines <input type="checkbox"/> Watertight sewer lines <input type="checkbox"/> Lateral lines <input type="checkbox"/> Cess pool	<input type="checkbox"/> Seepage pit <input type="checkbox"/> Pit privy <input type="checkbox"/> Sewage lagoon <input type="checkbox"/> Feedyard <input type="checkbox"/> Livestock pens	<input type="checkbox"/> Fuel storage <input type="checkbox"/> Fertilizer storage <input type="checkbox"/> Insecticide storage <input type="checkbox"/> Abandoned water well <input type="checkbox"/> Oil well/Gas well	<input type="checkbox"/> Other (specify below) _____ Direction from well? _____ How many feet? _____	

FROM	TO	PLUGGING MATERIALS	FROM	TO	PLUGGING MATERIALS
3	16	Bentonite			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 4/2/2020 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. _____. This Water Well Record was completed on (mo/day/year) 4/9/2020 under the business name of GreenField Contractors, Inc. by (signature) <i>Melissa D. McWhorter</i>

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.

KSA82a-1212

Revised 1/20/2015