

WATER WELL PLUGGING RECORD Form WWC-5P

KSA 82a-1212

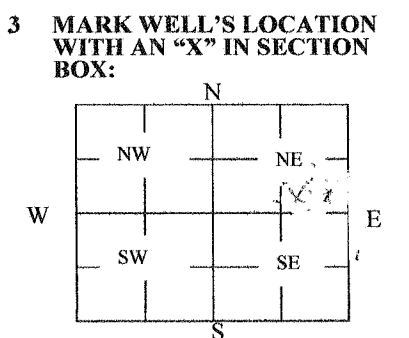
ID NO.

179

1 LOCATION OF WATER WELL: Fraction NW 1/4 SW 1/4 SE 1/4 NE 1/4 Section Number 24 Township Number T2 S Range Number 24 E W
 County: Hodgeman

Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here on N side of Rd
1/2 mile West on R20 off of 283 Hwy
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: Bernard A Springer
 RR#, St. Address, Box #: Heirs Partners
 City, State ZIP Code: _____



4 DEPTH OF WELL 15 ft.
 WELL'S STATIC WATER LEVEL 0 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 _____
 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 Rock Hand Dug Well
 Blank casing diameter _____ in. Was casing pulled? Yes No If yes, how much _____
 Casing height above or below land surface 60 in.

6 GROUT PLUG MATERIAL: Neat cement Cement grout Bentonite Other _____
 Grout Plug Intervals: From 0 ft. to 5 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
 Watertight sewer lines Sewage lagoon Insecticide storage
 Lateral lines Feedyard Abandoned water well Direction from well? NA
 Cess pool Livestock pens Oil well/Gas well How many feet? NA

FROM	TO	PLUGGING MATERIALS	FROM	TO	PLUGGING MATERIALS
0	5	Top soil			
5	10	Bentonite			
10	15	clean sand			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 1-15-12 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 179. This Water Well Record was completed on (mo/day/year) 1-15-12 under the business name of Joe's Well Service by (signature) [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>.