

WATER WELL PLUGGING RECORD Form WWC-5P

KSA 82a-1212

ID NO.

dismissed 46577

1 LOCATION OF WATER WELL: County: <u>Reno</u> 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"/> Approximately 0.75 miles west and 0.75 miles south of Willowbrook, KS	Fraction <u>1/4 SE 1/4 NE 1/4 SW 1/4</u> Section Number <u>32</u> Township Number <u>T 22 S</u> Range Number <u>6</u> <input type="checkbox"/> E <input checked="" type="checkbox"/> W	Global Positioning Systems (GPS) information: Latitude: <u>38.09042</u> (in decimal degrees) Longitude: <u>-98.00561</u> (in decimal degrees) Elevation: _____ Datum: <input type="checkbox"/> WGS84, <input type="checkbox"/> NAD83, <input checked="" type="checkbox"/> NAD27 Collection Method: <input checked="" type="checkbox"/> GPS unit (Make/Model: <u>Garmin GPSmap 60CSx</u>) <input type="checkbox"/> Digital Map/Photo, <input type="checkbox"/> Topographic Map, <input type="checkbox"/> Land Survey Est. Accuracy: <input type="checkbox"/> < 3 m, <input checked="" type="checkbox"/> 3-5 m, <input type="checkbox"/> 5-15 m, <input type="checkbox"/> > 15 m																																										
2 WATER WELL OWNER: Heatherwreath Partners LP RR#, St. Address, Box #: <u>5016 N Hendricks St</u> City, State ZIP Code: <u>Hutchinson, KS 67502</u>	3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX: <div style="text-align: center;"> </div>																																											
4 DEPTH OF WELL <u>40</u> ft. WELL'S STATIC WATER LEVEL <u>11</u> ft. WELL WAS USED AS: <div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> Domestic <input type="checkbox"/> Irrigation <input type="checkbox"/> Feedlot <input type="checkbox"/> Industrial </div> <div> <input type="checkbox"/> Public Water Supply <input type="checkbox"/> Oil Field Water Supply <input type="checkbox"/> Domestic (Lawn & Garden) <input type="checkbox"/> Air Conditioning </div> <div> <input type="checkbox"/> Dewatering <input type="checkbox"/> Monitoring <input type="checkbox"/> Injection Well <input checked="" type="checkbox"/> Other <u>Test Well</u> </div> </div> Was a chemical/bacteriological sample submitted to Department? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>																																												
5 TYPE OF BLANK CASING USED: <div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> Steel <input checked="" type="checkbox"/> PVC </div> <div> <input type="checkbox"/> RMP (SR) <input type="checkbox"/> ABS </div> <div> <input type="checkbox"/> Wrought <input type="checkbox"/> Asbestos-Cement </div> <div> <input type="checkbox"/> Fiberglass <input type="checkbox"/> Concrete Tile </div> <div> <input type="checkbox"/> Other (Specify below) _____ </div> </div> Blank casing diameter <u>2.5</u> in. Was casing pulled? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If yes, how much _____ Casing height above or below land surface <u>below 36</u> 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 <u>40</u> ft. to <u>3</u> ft., From _____ ft. to _____ ft., From _____ to _____ ft. What is the nearest source of possible contamination: <div style="display: flex; justify-content: space-between;"> <div> <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 </div> <div> <input type="checkbox"/> Seepage pit <input type="checkbox"/> Pit privy <input type="checkbox"/> Sewage lagoon <input type="checkbox"/> Feedyard <input type="checkbox"/> Livestock pens </div> <div> <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 </div> <div> <input checked="" type="checkbox"/> Other (specify below) <u>Test Well</u> Direction from well? <u>south</u> How many feet? <u>approximately 470 ft.</u> </div> </div>																																												
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>FROM</th> <th>TO</th> <th>PLUGGING MATERIALS</th> <th>FROM</th> <th>TO</th> <th>PLUGGING MATERIALS</th> </tr> </thead> <tbody> <tr> <td>40</td> <td>3</td> <td>Bentonite Hole Plug</td> <td></td> <td></td> <td>Well plugging witnessed by</td> </tr> <tr> <td>3</td> <td>0</td> <td>Topsoil</td> <td></td> <td></td> <td>D. Randolph, GMD2 staff, on</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td>4/16/2014</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>			FROM	TO	PLUGGING MATERIALS	FROM	TO	PLUGGING MATERIALS	40	3	Bentonite Hole Plug			Well plugging witnessed by	3	0	Topsoil			D. Randolph, GMD2 staff, on						4/16/2014																		
FROM	TO	PLUGGING MATERIALS	FROM	TO	PLUGGING MATERIALS																																							
40	3	Bentonite Hole Plug			Well plugging witnessed by																																							
3	0	Topsoil			D. Randolph, GMD2 staff, on																																							
					4/16/2014																																							
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) <u>4/16/2014</u> 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) <u>4/24/2014</u> under the business name of <u>Heatherwreath Partners LP</u> by (signature) <u>David Stroberg</u>																																												
INSTRUCTIONS: Use typewriter or ballpoint pen. Please press firmly and print clearly. Please fill in blanks, underline or circle the correct answers. Send one copy to Kansas Department of Health and Environment, Bureau of Water, Geology 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 .																																												

RECEIVED

APR 28 2014