Corrected 12/18/20

KOLAR Document ID: 1535761

WATER WELL PLUGGING RECORD **Form WWC-5P** **KSA 82a-1212** **ID NO.** MW-4

1 **LOCATION OF WATER WELL:** County: Hodgeman	Fraction SE ¼ SW¼ NE ¼ SW ¼	Section Number 6	Township Number 23 T S	Range Number 23 ☐ E ☐ W

Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here ☐ South Highway 283 Jetmore, KS

Global Positioning Systems (GPS) information:
Latitude: 38.07806 (in decimal degrees)
Longitude: 99.89306 (in decimal degrees)
Elevation: 2268
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: ADM/Collingwood Grain
RR#, St. Address, Box #: 4666 Faries Pkwy
City, State ZIP Code: Decatur IL 62526

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

N
NW NE
W E
SW SE
S

4 DEPTH OF WELL 36.65 **ft.**

WELL'S STATIC WATER LEVEL 28.98 ft

WELL WAS USED AS:

☐ Domestic ☐ Irrigation ☐ Feedlot ☐ Industrial
☐ Public Water Supply ☐ Oil Field Water Supply ☐ Domestic (Lawn & Garden) ☐ Air Conditioning
☐ Dewatering ☑ Monitoring ☐ Injection Well ☐ Other ____

Was a chemical/bacteriological sample submitted to Department? Yes ☐ No ☑

5 TYPE OF BLANK CASING USED:

☐ Steel ☑ PVC ☐ RMP (SR) ☐ ABS ☐ Wrought ☐ Asbestos-Cement ☐ Fiberglass ☐ Concrete Tile ☐ Other (Specify below) ____

Blank casing diameter 2 in. Was casing pulled? Yes ☑ No ☐ If yes, how much top 3'
Casing height above or below land surface 36 in.

6 GROUT PLUG MATERIAL: ☐ Neat cement ☐ Cement grout ☑ Bentonite ☐ Other ____

Grout Plug Intervals: From 3 ft. to 36.65 ft., From ____ ft. to ____ ft., From ____ ft. to ____ ft.

What is the nearest source of possible contamination:

☐ Septic tank ☐ Sewer lines ☐ Watertight sewer lines ☐ Lateral lines ☐ Cess pool
☐ Seepage pit ☐ Pit privy ☐ Sewage lagoon ☐ Feedyard ☐ Livestock pens
☐ Fuel storage ☑ Fertilizer storage ☐ Insecticide storage ☐ Abandoned water well ☐ Oil well/Gas well
☐ Other (specify below) ____

Direction from well? SE
How many feet? 300

FROM	TO	PLUGGING MATERIALS	FROM	TO	PLUGGING MATERIALS
0	3	Native soil / gravel			
3	36.65	Bentonite			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 10/30/2020 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 708. This Water Well Record was completed on (mo/day/year) 11/9/2020 under the business name of SCS Engineers by (signature) ____

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.