

Corrected 12/18/20

WATER WELL PLUGGING RECORD Form WWC-5P

KSA 82a-1212

ID NO.

VOB-2

1 LOCATION OF WATER WELL: County: Hodgeman	Fraction SW ¼ SW ¼ NE ¼ SW ¼	Section Number 6	Township Number 23 T S	Range Number 23 E W
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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: 38.0775 (in decimal degrees)

Longitude: 99.89361 (in decimal degrees)

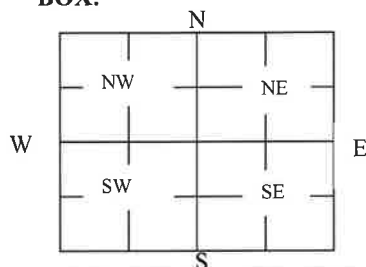
Elevation: 2271

Datum: ☐ WGS84, ☒ NAD83, ☐ NAD27

Collection Method:

☐ GPS unit (Make/Model: _____)☐ Digital Map/Photo, ☐ Topographic Map, ☒ Land SurveyEst. 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:**4 DEPTH OF WELL** 25.43 **ft.**WELL'S STATIC WATER LEVEL 25.43 **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 25.43 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? 400

FROM	TO	PLUGGING MATERIALS	FROM	TO	PLUGGING MATERIALS
0	3	Native soil/gravel			
3	25.43	Bentonite			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 10/29/2020 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.