

WATER WELL PLUGGING RECORD

Form WWC-5P

KSA 82a-1212

ID No.

IAS-3

| 1 LOCATION OF WATER WELL: | | Fraction | Section Number | Township Number | Range Number | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|--|------------------------------|--|--------------------------|-------------------------|---------------------|---------------|-----------------------|-----------------|--------------------------|--------------------------|--------------------|-----------------------|------------------------------|--------------------------|-----------------|------------------------|---------------------------|-----------------|------------|-------------------------|--|-------------|-------------------|-----------------------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
| County: <u>Reno</u> | | <u>SW 1/4 SW 1/4 SW 1/4</u> | <u>6</u> | <u>23S</u> | <u>5W</u> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Distance and direction from nearest town or city street address of well if located within city? <u>1700 N Plum, Hutchinson, KS</u> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 2 WATER WELL OWNER: <u>Town Pump</u> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| RR#, St. Address, Box # <u>1700 N Plum</u> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| City, State, ZIP Code <u>Hutchinson, KS 67501</u> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Board of Agriculture, Division of Water Resources Application Number: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX: | | 4 DEPTH OF WELL <u>26.5</u> ft. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <div style="text-align: center;"> </div> | | WELL'S STATIC WATER LEVEL <u>15</u> ft. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | WELL WAS USED AS: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | <table style="width:100%;"> <tr> <td>1 Domestic</td> <td>5 Public Water Supply</td> <td>9 Dewatering</td> </tr> <tr> <td>2 Irrigation</td> <td>6 Oil Field Water Supply</td> <td>10 Monitoring Well</td> </tr> <tr> <td>3 Feedlot</td> <td>7 Lawn and Garden (domestic)</td> <td>11 Injection Well</td> </tr> <tr> <td>4 Industrial</td> <td>8 Air Conditioning</td> <td>12 Other <u>Injection</u></td> </tr> </table> | | | | 1 Domestic | 5 Public Water Supply | 9 Dewatering | 2 Irrigation | 6 Oil Field Water Supply | 10 Monitoring Well | 3 Feedlot | 7 Lawn and Garden (domestic) | 11 Injection Well | 4 Industrial | 8 Air Conditioning | 12 Other <u>Injection</u> | | | | | | | | | | | | | | | | | | | | | | | | |
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| Was a chemical/bacteriological sample submitted to Department? Yes <u> </u> No <u> </u> If yes, mo/day/yr sample was submitted <u> </u> Water Well Disinfected: Yes <u> </u> No <u> </u> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 5 TYPE OF BLANK CASING USED: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Blank casing diameter <u>2</u> in. Was casing pulled? Yes <u>x</u> No <u> </u> If yes, how much <u>3</u> feet | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Casing height above or below land surface <u> </u> in. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout <u>3</u> Bentonite 4 Other <u> </u> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Grout Plug Intervals From <u> </u> ft. to <u> </u> ft. From <u> </u> ft. to <u> </u> ft. From <u> </u> ft. to <u> </u> ft. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| What is the nearest source of possible contamination: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Direction from well? <u> </u> How many feet? <u> </u> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/yr) <u>12/18/11</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>12/20/11</u> under the business name of <u>Bluestem Environmental Engineering, Inc.</u> This Water Well Record was completed on (mo/day/yr) <u> </u> by (signature) <u>Nick Hart</u> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment, Bureau of Water, 1000 S W Jackson St., Ste. 420, Topeka, Kansas 66620-0001. Telephone: 785-298-3585. Send one to Water Well Owner and retain one for your records. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |