

WATER WELL PLUGGING RECORD Form WWC-5P

KSA 82a-1212

ID NO.

MW-4

1 LOCATION OF WATER WELL: Fraction 1/4 NW 1/4 SW 1/4 NW 1/4 Section Number 16 Township Number T 23 S Range Number 5 ☐ E ☒ W

Street/Rural Address of Well Location: if unknown, distance & direction from nearest town or intersection: If at owner's address, check here ☒ **Sonoco Products Company**
100 N. Halstead
Hutchinson, KS 67501

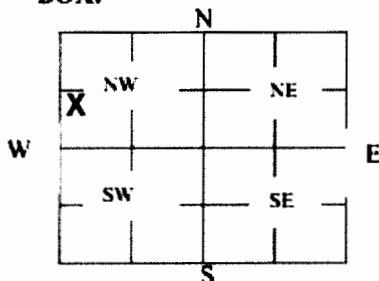
Global Positioning Systems (GPS) Information:

Latitude: ~~38.052217~~ 38.052217 (in decimal degrees)
Longitude: -97.884591 (in decimal degrees)
Elevation: 1521
Datum: ☒ WGS84, ☐ NAD83, ☐ NAD27
Collection Method:

2 WATER WELL OWNER: **Sonoco Products Company**
RR#, St. Address, Box #: **100 N. Halstead**
City, State ZIP Code: **Hutchinson, KS 67501**

☐ GPS unit (Make/Model):
☒ Digital Map/Photo, ☐ Topographic Map, ☐ Land Survey
Est. Accuracy: ☐ < 3 m, ☐ 3-5 m, ☐ 5-15 m, ☒ > 15 m

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



4 DEPTH OF WELL 18.0 ft.

WELL'S STATIC WATER LEVEL 10.98 ft

WELL WAS USED AS:

☐ Domestic
☐ Irrigation
☐ Feedlot
☐ Industrial

☐ Public Water Supply
☐ Oil Field Water Supply
☐ Domestic (Lawn & Garden)
☐ Air Conditioning

☐ Dewatering
☒ Monitoring **MW-4**
☐ Injection Well
☐ 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

Blank casing diameter 2 in. Was casing pulled? Yes ☒ No ☐ If yes, how much all
Casing height above or below land surface (removed all casing)

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

Grout Plug Intervals: From 18 ft. to 0 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? _____
How many feet? _____

FROM	TO	PLUGGING MATERIALS	FROM	TO	PLUGGING MATERIALS
18	0	hydrated bentonite			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 8/4/2016 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 416. This Water Well Record was completed on (mo/day/year) 8/4/2016 under the business name of Terracon Consultants Inc. 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>.