WATER WELL PLUGGING RECORD FORM WWC-5P KSA 82a-1212

1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: **Stafford**	NE ¼ NE ¼ NE ¼	14	24	12

Distance and direction from nearest town or city street address of well if located within city?

2 WATER WELL OWNER: **Zenith Coop & Grain Co**
RR#, St. Address, Box # **1619 N. Main** Board of Agriculture, Division of Water Resources
City, State, ZIP Code : **Stafford, KS 67578** **MW-6** Application Number:

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

N
NW NE X
W E
SW SE
S

4 DEPTH OF WELL **24.5** ft.

WELL'S STATIC WATER LEVEL ____ ft.

WELL WAS USED AS:

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 12 Other ____

Was a chemical/bacteriological sample submitted to Department? Yes ____ No X
If yes, mo/day/yr sample was submitted ____
Water Well Disinfected: Yes ____ No X

5 TYPE OF BLANK CASING USED:
1 Steel 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (specify below)
[2] PVC 4 ABC 6 Asbestos-Cement 8 Concrete Tile
Blank casing diameter ____ in. Was casing pulled? Yes X No ____ If yes, how much **24.5**

Casing height above or below land surface ____ in.

6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other ____

Grout Plug Intervals From 20 ft. to 1 ft. From ____ ft. to ____ ft. From ____ ft. to ____ ft.

What is the nearest source of possible contamination:

1 Septic tank 6 Seepage pit 11 Fuel storage 16 Other (specify below)
2 Sewer lines 7 Pit privy 12 Fertilizer storage
3 Watertight sewer lines 8 Sewage lagoon 13 Insecticide storage
4 Lateral lines 9 Feedyard 14 Abandoned water well
5 Cess Pool 10 Livestock pens 15 Oil well/ Gas well

Direction from well? ____ How many feet? ____

FROM	TO	CODE	PLUGGING MATERIALS
			Overdrilled 20'
20	**1**		**Bentonite**
1	**0**		**Cement**

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NOV 03 2004
BUREAU OF WATER

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/yr) **9-28-04** and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **554** This Water Well Record was completed on (mo/day/yr) **10-22-04** under the business name of **Woofter Pump & Well, Inc.**
by (signature) Gary G. Woofter

INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment, Bureau of Water, Topeka, Kansas 66620-0001. Telephone: 785-296-3565. Send one to Water Well Owner and retain one for your records.

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