

## WATER WELL PLUGGING RECORD

Form WWC-5P

KSA 82a-1212

ID No.

MW-2

**1 LOCATION OF WATER WELL:** Fraction NE 1/4 NE 1/4 NE 1/4 Section Number 21 Township Number 24 S Range Number 15 W  
 County: Stafford  
 Distance and direction from nearest town or city street address of well if located within city?  
Hwy 50 and Main Street, Macksville, KS

**2 WATER WELL OWNER:** St. John's Coop  
 RR#, St. Address, Box # 312 W 1st St.  
 City, State, ZIP Code St. John, KS 67576  
 Board of Agriculture, Division of Water Resources  
 Application Number: \_\_\_\_\_

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

|    |  |    |   |
|----|--|----|---|
| N  |  |    |   |
| X  |  |    | X |
| NW |  | NE |   |
|    |  |    |   |
| SW |  | SE |   |
|    |  |    |   |
| S  |  | E  |   |

**4 DEPTH OF WELL** 28.68 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 Air Conditioning 12 Other \_\_\_\_\_  
 Was a chemical/bacteriological sample submitted to Department? Yes \_\_\_\_\_ No \_\_\_\_\_  
 If yes, mo/day/yr sample was submitted \_\_\_\_\_  
 Water Well Disinfected: Yes \_\_\_\_\_ No \_\_\_\_\_

**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 4 in. Was casing pulled? Yes X No \_\_\_\_\_ If yes, how much 3 ft.  
 Casing height above or below land surface -36 in.

**6 GROUT PLUG MATERIAL:** 1 Neat cement 2 Cement grout ③ Bentonite 4 Other \_\_\_\_\_  
 Grout Plug Intervals From 0 ft. to 28.68 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 |
|------|-------|------|--------------------|
| 0    | 28.68 |      | Bentonite grout    |
|      |       |      |                    |
|      |       |      |                    |
|      |       |      |                    |
|      |       |      |                    |
|      |       |      |                    |
|      |       |      |                    |
|      |       |      |                    |

**7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:** This water well was plugged under my jurisdiction and was completed on (mo/day/yr) 11/4/08 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) 11/17/08 under the business name of Nield-Hart Bluestem Environmental Engineering, Inc.  
 by (signature) \_\_\_\_\_

**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: 785-298-3565. Send one to Water Well Owner and retain one for your records.

RECEIVED

JAN 08 2009

BUREAU OF WATER