

WATER WELL PLUGGING RECORD Form WWC-5P

KSA 82a-1212

ID NO.

32954

1 LOCATION OF WATER WELL: County: <u>Harvey</u> Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here ☐ approximately 4.75 miles south and 0.25 miles east of Burrton, KS	Fraction <u>¼ NE ¼ SW ¼ NW ¼</u>	Section Number <u>21</u>	Township Number <u>T 24 S</u>	Range Number <u>3</u> ☐ E ☒ W																																																
2 WATER WELL OWNER: Pennington KS FRM LLC Etal RR#, St. Address, Box #: <u>48120 NW Hillside Rd</u> City, State ZIP Code: <u>Forest Grove, OR 97116</u>		Global Positioning Systems (GPS) information: Latitude: <u>37.95235</u> (in decimal degrees) Longitude: <u>-97.66080</u> (in decimal degrees) Elevation: Horizontal Datum: ☐ WGS84, ☐ NAD83, ☒ NAD27 Collection Method: ☒ GPS unit (Make/Model: <u>Garmin GPSmap 60CSx</u>) ☐ 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 <u>65</u> ft. WELL'S STATIC WATER LEVEL <u>7</u> 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 <u>16</u> in. Was casing pulled? Yes ☐ No ☒ If yes, how much _____ Casing height above or below land surface <u>below 36</u> in.																																																				
6 GROUT PLUG MATERIAL: ☐ Neat cement ☐ Cement grout ☒ Bentonite ☐ Other _____ Grout Plug Intervals: From <u>10</u> ft. to <u>3</u> 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) <u>None within 1/4 mile.</u> Direction from well? _____ How many feet? _____																																																				
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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/year) <u>11/4/2016</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. _____. This Water Well Record was completed on (mo/day/year) <u>11/8/2016</u> under the business name of _____ by (signature) <u>[Signature]</u>																																																				

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.

KSA82a-1212

RECEIVED
FEB 27 2017
 Equus Beds Groundwater
 Mansfield District No. 2
 Modified 1/20/2015