

WATER WELL PLUGGING RECORD

FORM WWC-5P

KSA 82a-1212

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number																																				
County: FINNEY		SE 1/4 SE 1/4 SE 1/4	16	24	32																																				
Distance and direction from nearest town or city street address of well if located within city?																																									
2 WATER WELL OWNER: Coastal Mart Inc																																									
RR#, St. Address, Box # 9 Greenway Plaza																																									
City, State, ZIP Code : Houston, Texas 77046 MW-1 Board of Agriculture, Division of Water Resources																																									
Application Number:																																									
3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:		2 DEPTH OF WELL 24.77 ft.																																							
<div style="text-align: center;">N</div> <table border="1" style="width:100%; height: 150px; border-collapse: collapse;"> <tr> <td style="width: 50%; text-align: center;">NW</td> <td style="width: 50%; text-align: center;">NE</td> </tr> <tr> <td style="width: 50%; text-align: center;">SW</td> <td style="width: 50%; text-align: center;">SE</td> </tr> </table> <div style="text-align: center;">S</div>		NW	NE	SW	SE	WELL'S STATIC WATER LEVEL _____ ft.																																			
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		WELL WAS USED AS:																																							
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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:																																									
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Blank casing diameter _____ in. Was casing pulled? Yes X No _____ If yes, how much 24.77																																									
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:																																									
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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/yr) 9-27-04 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) <i>[Signature]</i>																																									
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.																																									