

WATER WELL PLUGGING RECORD

Form WWC-5P

KSA 82a-1212

ID No. _____

1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: Finney	NW ¼ SE ¼ SE ¼	17	24	32
Distance and direction from nearest town or city street address of well if located within city?				
2 WATER WELL OWNER: City of Garden City				
RR#, St. Address, Box # 125 J. C. St.		Board of Agriculture, Division of Water Resources		
City, State, ZIP Code : Garden City, Ks 67846		Application Number: SV-1		
3 MARK WELL'S LOCATON WITH AN "X" IN SECTION BOX:	4 DEPTH OF WELL 25.50 ft.			
<div style="text-align: center;"> </div>	WELL'S STATIC WATER LEVEL NA ft.			
	WELL WAS USED AS:			
	<div style="display: flex; justify-content: space-between;"> <div> 1 Domestic 2 Irrigation 3 Feedlot 4 Industrial </div> <div> 5 Public Water Supply 6 Oil Field Water Supply 7 Lawn and Garden (domestic) 8 Air Conditioning </div> <div> 9 Dewatering <input checked="" type="checkbox"/> 10 Monitoring Well 11 Injection Well 12 Other </div> </div>			
	Was a chemical/bacteriological sample submitted to Department? Yes _____ No <input checked="" type="checkbox"/> X If yes, mo/day/yr sample was submitted _____ Water Well Disinfected: Yes _____ No <input checked="" type="checkbox"/> X			
5 TYPE OF BLANK CASING USED:				
<div style="display: flex; justify-content: space-between;"> <div>1 Steel <input checked="" type="checkbox"/> 2 PVC</div> <div>3 RMP (SR) 4 ABC</div> <div>5 Wrought 6 Asbestos-Cement</div> <div>7 Fiberglass 8 Concrete Tile</div> <div>9 Other (specify below)</div> </div>				
Blank casing diameter 4 in. Was casing pulled? Yes <input checked="" type="checkbox"/> X No _____ If yes, how much 20 ft.				
Casing height above or below land surface 0 in.				
6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other _____				
Grout Plug Intervals From 20 ft. to 0 ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.				
What is the nearest source of possible contamination:				
<div style="display: flex; justify-content: space-between;"> <div> 1 Septic tank 2 Sewer lines 3 Watertight sewer lines 4 Lateral lines 5 Cess Pool </div> <div> 6 Seepage pit 7 Pit privy 8 Sewage lagoon 9 Feedyard 10 Livestock pens </div> <div> 11 Fuel storage 12 Fertilizer storage 13 Insecticide storage 14 Abandoned water well 15 Oil well/ Gas well </div> <div> 16 Other (specify below) </div> </div>				
Direction from well? _____ How many feet? _____				
FROM	TO	CODE	PLUGGING MATERIALS	
			(overdrilled) 20 FT	
25.50	20		Bentonite inside casing	
20	3		Cement grout	
3	0		topsoil	
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/yr) 11-30-05 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) 12-30-05 under the business name of Woofert 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, 1000 S W Jackson St., Ste. 420, Topeka, Kansas 66620-0001. Telephone: 785-296-3565. Send one to Water Well Owner and retain one for your records.				