

WATER WELL PLUGGING RECORD

Form WWC-5P

KSA 82a-1212

ID No. _____

1 LOCATION OF WATER WELL:		Fraction County: Finney NW $\frac{1}{4}$ SE $\frac{1}{4}$ SE $\frac{1}{4}$	Section Number 17	Township Number 24	Range Number 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. City, State, ZIP Code Garden City, Ks 67846			Board of Agriculture, Division of Water Resources Application Number: SV-2																																																		
3 MARK WELL'S LOCATON WITH AN "X" IN SECTION BOX:		<table border="1" style="float: left; margin-right: 20px;"> <tr><td colspan="2" style="text-align: center;">N</td></tr> <tr><td style="text-align: center;">W</td><td style="text-align: center;">E</td></tr> <tr><td colspan="2" style="text-align: center;">S</td></tr> <tr><td style="text-align: center;">NW</td><td style="text-align: center;">NE</td></tr> <tr><td style="text-align: center;">SW</td><td style="text-align: center;">SE</td></tr> <tr><td colspan="2" style="text-align: center;">X</td></tr> </table> 4 DEPTH OF WELL 24.90 ft. WELL'S STATIC WATER LEVEL NA ft. WELL WAS USED AS: <table style="margin-left: 100px;"> <tr><td>1 Domestic</td><td>5 Public Water Supply</td><td>9 Dewatering</td></tr> <tr><td>2 Irrigation</td><td>6 Oil Field Water Supply</td><td>10 Monitoring Well</td></tr> <tr><td>3 Feedlot</td><td>7 Lawn and Garden (domestic)</td><td>11 Injection Well</td></tr> <tr><td>4 Industrial</td><td>8 Air Conditioning</td><td>12 Other</td></tr> </table>				N		W	E	S		NW	NE	SW	SE	X		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																								
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Was a chemical/bacteriological sample submitted to Department? Yes <input type="checkbox"/> No X If yes, mo/day/yr sample was submitted _____ Water Well Disinfected: Yes <input type="checkbox"/> No X																																																					
5 TYPE OF BLANK CASING USED: <table style="margin-left: 100px;"> <tr><td>1 Steel</td><td>3 RMP (SR)</td><td>5 Wrought</td><td>7 Fiberglass</td><td>9 Other (specify below)</td></tr> <tr><td><input checked="" type="checkbox"/> 2 PVC</td><td>4 ABC</td><td>6 Asbestos-Cement</td><td>8 Concrete Tile</td><td></td></tr> </table> Blank casing diameter 4 in. Was casing pulled? Yes X No <input type="checkbox"/> If yes, how much 20 FT Casing height above or below land surface 0 in.						1 Steel	3 RMP (SR)	5 Wrought	7 Fiberglass	9 Other (specify below)	<input checked="" type="checkbox"/> 2 PVC	4 ABC	6 Asbestos-Cement	8 Concrete Tile																																							
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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: <table style="margin-left: 100px;"> <tr><td>1 Septic tank</td><td>6 Seepage pit</td><td>11 Fuel storage</td><td>16 Other (specify below)</td></tr> <tr><td>2 Sewer lines</td><td>7 Pit privy</td><td>12 Fertilizer storage</td><td></td></tr> <tr><td>3 Watertight sewer lines</td><td>8 Sewage lagoon</td><td>13 Insecticide storage</td><td></td></tr> <tr><td>4 Lateral lines</td><td>9 Feedyard</td><td>14 Abandoned water well</td><td></td></tr> <tr><td>5 Cess Pool</td><td>10 Livestock pens</td><td>15 Oil well/ Gas well</td><td></td></tr> </table>						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																													
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Direction from well? _____ How many feet? _____																																																					
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 10%;">FROM</th> <th style="width: 10%;">TO</th> <th style="width: 10%;">CODE</th> <th colspan="3" style="width: 60%;">PLUGGING MATERIALS</th> </tr> </thead> <tbody> <tr> <td></td> <td></td> <td></td> <td colspan="3" style="text-align: center;">(overdrilled) 20 FT</td> </tr> <tr> <td>24.90</td> <td>20</td> <td></td> <td colspan="3" style="text-align: center;">Bentonite inside casing</td> </tr> <tr> <td>20</td> <td>3</td> <td></td> <td colspan="3" style="text-align: center;">Cement grout</td> </tr> <tr> <td>3</td> <td>0</td> <td></td> <td colspan="3" style="text-align: center;">topsoil</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>						FROM	TO	CODE	PLUGGING MATERIALS						(overdrilled) 20 FT			24.90	20		Bentonite inside casing			20	3		Cement grout			3	0		topsoil																				
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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) 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 Woofter Pump & Well Inc. by (signature) <i>Ray L. Woofter</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.																																																					