

## WATER WELL PLUGGING RECORD

Form WWC-5P

KSA 82a-1212

ID No.

PMW-3

1 LOCATION OF WATER WELL:		Fraction County: Finney	NW $\frac{1}{4}$ NW $\frac{1}{4}$ NW $\frac{1}{4}$	Section Number 18	Township Number 24S	Range Number 32W																																																															
Distance and direction from nearest town or city street address of well if located within city? 705 Jones Avenue, Garden City, Kansas																																																																					
2 WATER WELL OWNER:		Del Ray Mounts RR# 1, St. Address, Box # PO Box 666	Board of Agriculture, Division of Water Resources City, State, ZIP Code Garden City, KS Application Number:																																																																		
3 MARK WELL'S LOCATON WITH AN 'X' IN SECTION BOX:		<table border="1" style="display: inline-table; vertical-align: middle;"> <tr><td colspan="2" style="text-align: center;">N</td></tr> <tr><td style="text-align: center;">X</td><td></td></tr> <tr><td colspan="2" style="text-align: center;">W</td></tr> <tr><td colspan="2"></td></tr> <tr><td colspan="2" style="text-align: center;">E</td></tr> <tr><td colspan="2"></td></tr> <tr><td colspan="2" style="text-align: center;">S</td></tr> <tr><td colspan="2"></td></tr> </table> <span style="display: inline-block; vertical-align: middle; text-align: center;">NW NE SW SE</span>		N		X		W				E				S				4 DEPTH OF WELL 32.9 ft.																																																	
N																																																																					
X																																																																					
W																																																																					
E																																																																					
S																																																																					
				WELL'S STATIC WATER LEVEL 32.5 ft.																																																																	
				WELL WAS USED AS:																																																																	
		<input type="checkbox"/> 1 Domestic <input type="checkbox"/> 2 Irrigation <input type="checkbox"/> 3 Feedlot <input type="checkbox"/> 4 Industrial		<input type="checkbox"/> 5 Public Water Supply <input type="checkbox"/> 6 Oil Field Water Supply <input type="checkbox"/> 7 Lawn and Garden (domestic) <input type="checkbox"/> 8 Air Conditioning		<input type="checkbox"/> 9 Dewatering <input checked="" type="checkbox"/> 10 Monitoring Well <input type="checkbox"/> 11 Injection Well <input type="checkbox"/> 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:																																																																					
<input type="checkbox"/> 1 Steel <input checked="" type="checkbox"/> 2 PVC		<input type="checkbox"/> 3 RMP (SR) <input type="checkbox"/> 4 ABC		<input type="checkbox"/> 5 Wrought <input type="checkbox"/> 6 Asbestos-Cement		<input type="checkbox"/> 7 Fiberglass <input type="checkbox"/> 8 Concrete Tile																																																															
						<input type="checkbox"/> 9 Other (specify below)																																																															
Blank casing diameter 2 in.		Was casing pulled? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>		If yes, how much		3 feet																																																															
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 ... ft. to ... ft. From ... ft. to ... ft. From ... ft. to ... ft.																																																																					
What is the nearest source of possible contamination:																																																																					
<input type="checkbox"/> 1 Septic tank <input type="checkbox"/> 2 Sewer lines <input type="checkbox"/> 3 Watertight sewer lines <input type="checkbox"/> 4 Lateral lines <input type="checkbox"/> 5 Cess Pool		<input type="checkbox"/> 6 Seepage pit <input type="checkbox"/> 7 Pit privy <input type="checkbox"/> 8 Sewage lagoon <input type="checkbox"/> 9 Feedyard <input type="checkbox"/> 10 Livestock pens		<input type="checkbox"/> 11 Fuel storage <input type="checkbox"/> 12 Fertilizer storage <input type="checkbox"/> 13 Insecticide storage <input type="checkbox"/> 14 Abandoned water well <input type="checkbox"/> 15 Oil well/ Gas well		<input type="checkbox"/> 16 Other (specify below)																																																															
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="4" style="width: 60%;">PLUGGING MATERIALS</th> </tr> </thead> <tbody> <tr> <td>0</td> <td>32.9</td> <td></td> <td colspan="4">Bentonite chips</td> </tr> <tr><td></td><td></td><td></td><td colspan="4"></td></tr> </tbody> </table>							FROM	TO	CODE	PLUGGING MATERIALS				0	32.9		Bentonite chips																																																				
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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) 3/30/10 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 4/27/10 under the business name of <i>Nik Dht</i> This Water Well Record was completed on (mo/day/yr) 4/27/10 by (signature) <i>Nik Dht</i> Bluestem Environmental Engineering, Inc.																																																																					
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: 785-296-3585. Send one to Water Well Owner and retain one for your records.																																																																					