

WATER WELL PLUGGING RECORD Form WWC-5P KSA 82a-1212 ID NO.

MW-5

1 LOCATION OF WATER WELL: County: <u>Edwards</u>	Fraction <u>NW ¼ NE ¼ NW ¼ NW ¼</u>	Section Number <u>4</u>	Township Number <u>T 25 S</u>	Range Number <u>16</u> <input type="checkbox"/> E <input checked="" type="checkbox"/> W
Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here <input type="checkbox"/> South side Road M, 850 feet east of 270th Ave.		Global Positioning Systems (GPS) information: Latitude: <u>37.912537°</u> (in decimal degrees) Longitude: <u>-99.09291°</u> (in decimal degrees) Elevation: <u>2,090.81 feet (top of casing)</u> Horizontal Datum: <input checked="" type="checkbox"/> WGS84, <input type="checkbox"/> NAD83, <input type="checkbox"/> NAD27 Collection Method: <input checked="" type="checkbox"/> GPS unit (Make/Model: <u>Garmin / GPSmap 64 csx</u>) <input checked="" type="checkbox"/> Digital Map/Photo, <input type="checkbox"/> Topographic Map, <input checked="" type="checkbox"/> Land Survey Est. Accuracy: <input checked="" type="checkbox"/> < 3 m, <input type="checkbox"/> 3-5 m, <input type="checkbox"/> 5-15 m, <input type="checkbox"/> > 15 m		
2 WATER WELL OWNER: Northern Natural Gas Co. RR#, St. Address, Box #: <u>1111 S. 103rd St.</u> City, State ZIP Code: <u>Omaha, NE 68124</u>				

3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX: <div style="text-align: center;"> <table style="margin: auto; border-collapse: collapse;"> <tr><td></td><td style="text-align: center;">N</td><td></td></tr> <tr><td style="text-align: center;">X</td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td></td></tr> <tr><td style="text-align: center;">NW</td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="text-align: center;">NE</td></tr> <tr><td style="text-align: center;">W</td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="text-align: center;">E</td></tr> <tr><td style="text-align: center;">SW</td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="text-align: center;">SE</td></tr> <tr><td></td><td style="text-align: center;">S</td><td></td></tr> </table> </div>		N		X			NW		NE	W		E	SW		SE		S		4 DEPTH OF WELL <u>46.55</u> ft. (below top of casing; casing stick-up = 2.33 ft.) WELL'S STATIC WATER LEVEL <u>39.05</u> ft (below top of casing) WELL WAS USED AS: <table style="width:100%;"> <tr> <td><input type="checkbox"/> Domestic</td> <td><input type="checkbox"/> Public Water Supply</td> <td><input type="checkbox"/> Dewatering</td> </tr> <tr> <td><input type="checkbox"/> Irrigation</td> <td><input type="checkbox"/> Oil Field Water Supply</td> <td><input checked="" type="checkbox"/> Monitoring</td> </tr> <tr> <td><input type="checkbox"/> Feedlot</td> <td><input type="checkbox"/> Domestic (Lawn & Garden)</td> <td><input type="checkbox"/> Injection Well</td> </tr> <tr> <td><input type="checkbox"/> Industrial</td> <td><input type="checkbox"/> Air Conditioning</td> <td><input type="checkbox"/> Other _____</td> </tr> </table> <p>Was a chemical/bacteriological sample submitted to Department? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/></p>	<input type="checkbox"/> Domestic	<input type="checkbox"/> Public Water Supply	<input type="checkbox"/> Dewatering	<input type="checkbox"/> Irrigation	<input type="checkbox"/> Oil Field Water Supply	<input checked="" type="checkbox"/> Monitoring	<input type="checkbox"/> Feedlot	<input type="checkbox"/> Domestic (Lawn & Garden)	<input type="checkbox"/> Injection Well	<input type="checkbox"/> Industrial	<input type="checkbox"/> Air Conditioning	<input type="checkbox"/> Other _____
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5 TYPE OF BLANK CASING USED:

<input type="checkbox"/> Steel	<input type="checkbox"/> RMP (SR)	<input type="checkbox"/> Wrought	<input type="checkbox"/> Fiberglass	<input type="checkbox"/> Other (Specify below) _____
<input checked="" type="checkbox"/> PVC	<input type="checkbox"/> ABS	<input type="checkbox"/> Asbestos-Cement	<input type="checkbox"/> Concrete Tile	

Blank casing diameter 2 in. Was casing pulled? Yes No If yes, how much 5 feet (incl. stick-up)
Casing height above or below land surface -18 in. (after pulling top 3.8 feet of casing)

6 GROUT PLUG MATERIAL: Neat cement Cement grout Bentonite Other _____

Grout Plug Intervals: From 1.5 ft. to 44.2 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.

What is the nearest source of possible contamination:

<input type="checkbox"/> Septic tank	<input type="checkbox"/> Seepage pit	<input type="checkbox"/> Fuel storage	<input checked="" type="checkbox"/> Other (specify below)
<input type="checkbox"/> Sewer lines	<input type="checkbox"/> Pit privy	<input type="checkbox"/> Fertilizer storage	<u>Natural gas condensate storage tank</u>
<input type="checkbox"/> Watertight sewer lines	<input type="checkbox"/> Sewage lagoon	<input type="checkbox"/> Insecticide storage	
<input type="checkbox"/> Lateral lines	<input type="checkbox"/> Feedyard	<input type="checkbox"/> Abandoned water well	Direction from well? <u>Northeast</u>
<input type="checkbox"/> Cess pool	<input type="checkbox"/> Livestock pens	<input type="checkbox"/> Oil well/Gas well	How many feet? <u>30</u>

FROM	TO	PLUGGING MATERIALS	FROM	TO	PLUGGING MATERIALS
0	1.5	Soil			
1.5	36.2	Bentonite chips			
36.2	44.2	Coated bentonite pellets			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 7/12/2023 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 416. This Water Well Record was completed on (mo/day/year) 8/10/2023 under the business name of Terracon Consultants, Inc. by (signature) Michael W. Montgomery

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.