

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

1 LOCATION OF WATER WELL: Fraction sw 1/4 sw 1/4 ne 1/4 se 1/4 Section Number 22 Township Number T 25 S Range Number 35 E W
 County: Kearny

Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here
Eight miles South and 1/4mile West Deerfield Ks.

Global Positioning Systems (GPS) information:
 Latitude: 37.861362 (in decimal degrees)
 Longitude: -101.144289 (in decimal degrees)
 Elevation: 3011
 Datum: WGS84, NAD83, NAD27
 Collection Method:

2 WATER WELL OWNER: Graham Farms Inc.
 RR#, St. Address, Box #: 2156 road 220
 City, State ZIP Code: Deerfield Ks. 67838

GPS unit (Make/Model: cell phone app.)
 Digital Map/Photo, Topographic Map, Land Survey
 Est. Accuracy: < 3 m, 3-5 m, 5-15 m, > 15 m

3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:

N		
NW		NE
SW		X SE
S		

4 DEPTH OF WELL 400 ft.
 WELL'S STATIC WATER LEVEL 295 ft.
 WELL WAS USED AS:

<input type="checkbox"/> Domestic	<input type="checkbox"/> Public Water Supply	<input type="checkbox"/> Dewatering
<input checked="" type="checkbox"/> Irrigation	<input type="checkbox"/> Oil Field Water Supply	<input 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 _____

Was a chemical/bacteriological sample submitted to Department? Yes No

5 TYPE OF BLANK CASING USED:

Steel RMP (SR) Wrought Fiberglass Other (Specify below)
 PVC ABS Asbestos-Cement Concrete Tile

Blank casing diameter 16 in. Was casing pulled? Yes No If yes, how much cut off top 5 ft.
 Casing height above or below land surface Before cutting 12 in above after cutting 4 ft. below surface

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

Grout Plug Intervals: From 7.5 ft. to 3.5 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 type="checkbox"/> Other (specify below)
<input type="checkbox"/> Sewer lines	<input type="checkbox"/> Pit privy	<input checked="" type="checkbox"/> Fertilizer storage used for irrigation sprinkler	
<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>NW</u>
<input type="checkbox"/> Cess pool	<input type="checkbox"/> Livestock pens	<input type="checkbox"/> Oil well/Gas well	How many feet? <u>975</u>

FROM	TO	PLUGGING MATERIALS	FROM	TO	PLUGGING MATERIALS
389 ft.	290 ft.	washed gravel			
290 ft.	7.5	Clay -silt			
7.5	4.25	Cement grout			
4.25 ft.	3.5 ft.	Cement grout cap 42 in. across			
3.5	0	Clay slit			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 12-11-2015 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 907. This Water Well Record was completed on (mo/day/year) 12-26-2015 under the business name of _____ by (signature) [Signature]

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.