

WATER WELL PLUGGING RECORD

Form WWC-5P

KSA 82a-1212

ID No.

SVE-2/OB-3

1 LOCATION OF WATER WELL:	Fraction <u>NE 1/4 NE 1/4 NW 1/4</u>	Section Number <u>26</u>	Township Number <u>25</u>	Range Number <u>6W</u>																																				
County: <u>Reno</u>																																								
Distance and direction from nearest town or city street address of well if located within city? <u>Castleton, Kansas</u>																																								
2 WATER WELL OWNER: <u>Farmer's Coop Grain Company</u>																																								
RR#, St. Address, Box # <u>112 W Second</u>																																								
City, State, ZIP Code <u>Haven, KS 67543</u>																																								
Board of Agriculture, Division of Water Resources Application Number:																																								
3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4 DEPTH OF WELL <u>10</u> ft.																																							
	WELL'S STATIC WATER LEVEL _____ ft.																																							
	WELL WAS USED AS:																																							
	1 Domestic 2 Irrigation 3 Feedlot 4 Industrial 5 Public Water Supply 6 Oil Field Water Supply 7 Lawn and Garden (domestic) 8 Air Conditioning 9 Dewatering 10 Monitoring Well 11 Injection Well 12 Other <u>Soil Vapor Extraction</u>																																							
	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:																																								
1 Steel 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (specify below) 2 PVC 4 ABC 6 Asbestos-Cement 8 Concrete Tile																																								
Blank casing diameter <u>2</u> in. Was casing pulled? Yes <u>X</u> No _____ 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 <u>Bentonite</u> 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:																																								
1 Septic tank 2 Sewer lines 3 Watertight sewer lines 4 Lateral lines 5 Cess Pool 6 Seepage pit 7 Pit privy 8 Sewage lagoon 9 Feedyard 10 Livestock pens 11 <u>Fuel storage</u> 12 Fertilizer storage 13 Insecticide storage 14 Abandoned water well 15 Oil well/ Gas well 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 style="width:70%;">PLUGGING MATERIALS</th> </tr> </thead> <tbody> <tr> <td>3</td> <td>10</td> <td></td> <td>Bentonite grout-30% solids</td> </tr> <tr> <td>0</td> <td>3</td> <td></td> <td>Native materials</td> </tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> </tbody> </table>					FROM	TO	CODE	PLUGGING MATERIALS	3	10		Bentonite grout-30% solids	0	3		Native materials																								
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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) <u>9/1/11</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. _____ This Water Well Record was completed on (mo/day/yr) <u>9/8/11</u> under the business name of <u>Bluestem Environmental Engineering, Inc.</u> by (signature) <u>Nick Holt</u>																																								
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.																																								