

**WATER WELL PLUGGING RECORD**

Form WWC-5P

KSA 82a-1212

ID NO.

1 LOCATION OF WATER WELL: County: <b>Sedgwick</b>	Fraction <b>SE 1/4 NE 1/4 SE 1/4 NE 1/4</b>	Section Number <b>30</b>	Township Number <b>T 26 S</b>	Range Number <b>1</b> <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"/> <b>4321 N. Maize Rd. Maize, Kansas . 67101</b>	Global Positioning Systems (GPS) information: Latitude: <b>37.76145</b> (in decimal degrees) Longitude: <b>-97.46346</b> (in decimal degrees) Elevation: _____ 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: <b>iPhone</b> ) <input type="checkbox"/> Digital Map/Photo, <input type="checkbox"/> Topographic Map, <input type="checkbox"/> Land Survey Est. Accuracy: <input 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: <b>Edward Rose Dev. Co. LLC.</b> RR#, St. Address, Box #: <b>6101 Newport Rd.</b> City, State ZIP Code: <b>Portage, MI 49002</b>	
--	--

3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX: <div style="text-align: center;"> <table border="1" style="margin: auto; border-collapse: collapse;"> <tr><td colspan="3" style="text-align: center;">N</td></tr> <tr><td style="text-align: center;">NW</td><td style="text-align: center;">NE</td><td style="text-align: center;">X</td></tr> <tr><td style="text-align: center;">SW</td><td style="text-align: center;">SE</td><td></td></tr> <tr><td colspan="3" style="text-align: center;">S</td></tr> </table> </div>	N			NW	NE	X	SW	SE		S			4 DEPTH OF WELL <b>41</b> ft. WELL'S STATIC WATER LEVEL <b>30</b> ft. WELL WAS USED AS: <input checked="" 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 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 <input type="checkbox"/> No <input checked="" type="checkbox"/>
N													
NW	NE	X											
SW	SE												
S													

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 **5** in. Was casing pulled? Yes  No  If yes, how much **3 ft**  
 Casing height above or below land surface **below 36** in. *PKC*

6 GROUT PLUG MATERIAL:  Neat cement  Cement grout  Bentonite  Other \_\_\_\_\_

Grout Plug Intervals: From **30** ft. to **30** 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 type="checkbox"/> Fertilizer storage	
<input checked="" 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? <b>East</b>
<input type="checkbox"/> Cess pool	<input type="checkbox"/> Livestock pens	<input type="checkbox"/> Oil well/Gas well	How many feet? <b>20 ft plus</b>

FROM	TO	PLUGGING MATERIALS	FROM	TO	PLUGGING MATERIALS
0	3	compacted topsoil			
3	30	Bentonite			
30	41	chlorinated well gravel			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) **10/14/2021** and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License **236**. This Water Well Record was completed on (mo/day/year) **10/16/2021** under the business name of **Harp Well & Pump Service** by (signature) **Todd Harp**

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

KSA82a-1212 Revised 1/20/2015