

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

1 LOCATION OF WATER WELL: County: Ford Distance and direction from nearest town or city street address of well if located within city? 100 Frontview, Dodge City	Fraction SE ¼ SE ¼ SE ¼	Section Number 14	Township Number 26S	Range Number 25 W																																										
2 WATER WELL OWNER: Fas Stop (U-Pump-It) RR#, St. Address, Box #: 301 S. 2nd City, State, ZIP Code: Dodge City, KS 67801																																														
3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX: 		4 DEPTH OF WELL <u>140.00</u> ft. WELL'S STATIC WATER LEVEL <u>136.65</u> ft. WELL WAS USED AS: <table style="width:100%; border: none;"> <tr> <td>1 Domestic</td> <td>5 Public Water Supply</td> <td>9 Dewatering</td> </tr> <tr> <td>2 Irrigation</td> <td>6 Oil Field Water Supply</td> <td>10 Monitoring</td> </tr> <tr> <td>3 Feedlot</td> <td>7 Domestic (Lawn & Garden)</td> <td>11 Injection Well</td> </tr> <tr> <td>4 Industrial</td> <td>8 Air Conditioning</td> <td>12 <u>Other</u> Soil Vapor Extraction</td> </tr> </table> Was a chemical/bacteriological sample submitted to Department? Yes ___ No <u>X</u>			1 Domestic	5 Public Water Supply	9 Dewatering	2 Irrigation	6 Oil Field Water Supply	10 Monitoring	3 Feedlot	7 Domestic (Lawn & Garden)	11 Injection Well	4 Industrial	8 Air Conditioning	12 <u>Other</u> Soil Vapor Extraction																														
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5 TYPE OF BLANK CASING USED: 1 Steel 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (Specify below) 2 <u>PVC</u> 4 ABS 6 Asbestos-Cement 8 Concrete Tile																																														
Blank casing diameter <u>4</u> in. Was casing pulled? Yes <u>X</u> No ___ If yes, how much <u>3</u> ft. Casing height above or <u>below</u> land surface <u>3</u> ft.																																														
6 GROUT PLUG MATERIAL: 1 Neat cement 2 <u>Cement grout</u> 3 Bentonite 4 Other ___ Grout Plug Intervals: From <u>3</u> ft. to <u>140</u> ft., From ___ ft. to ___ ft., From ___ to ___ ft.																																														
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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/year) <u>10/26/09</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>531</u> . This Water Well Record was completed on (mo/day/year) <u>11/13/09</u> under the business name of <u>Geotechnical Services, Inc.</u> by (signature) <u>[Signature]</u>																																														
INSTRUCTIONS: Please fill in blanks or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Ste. 420, Topeka, Kansas 66612-1367. Telephone: 785/296-5522. Send one to Water Well Owner and retain one for your records. Visit us at http://www.kdheks.gov/waterwell .																																														