

WATER WELL PLUGGING RECORD

Form WWC-5P

KSA 82a-1212

ID No. AS-7

1 LOCATION OF WATER WELL:		Fraction County: <u>Gray</u> <u>SE 1/4 NW 1/4 NE 1/4</u>	Section Number <u>11</u>	Township Number <u>26</u>	Range Number <u>28</u>																																																
Distance and direction from nearest town or city street address of well if located within city?																																																					
2 WATER WELL OWNER: Grain Growers Coop RR#, St. Address, Box # 202 N. Main City, State, ZIP Code : Cimarron, Ks 67835 Board of Agriculture, Division of Water Resources Application Number: AS-7																																																					
3 MARK WELL'S LOCATON WITH AN "X" IN SECTION BOX:		4 DEPTH OF WELL <u>56</u> ft. WELL'S STATIC WATER LEVEL <u>45.18</u> ft. WELL WAS USED AS: <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%;">1 Domestic</td> <td style="width: 33%;">5 Public Water Supply</td> <td style="width: 33%;">9 Dewatering</td> </tr> <tr> <td>2 Irrigation</td> <td>6 Oil Field Water Supply</td> <td>10 Monitoring Well</td> </tr> <tr> <td>3 Feedlot</td> <td>7 Lawn and Garden (domestic)</td> <td>11 Injection Well</td> </tr> <tr> <td>4 Industrial</td> <td>8 Air Conditioning</td> <td>12 Other Air Sparge</td> </tr> </table> Was a chemical/bacteriological sample submitted to Department? Yes <u> </u> No <u> </u> If yes, mo/day/yr sample was submitted _____ Water Well Disinfected: Yes <u> </u> No <u> </u>				1 Domestic	5 Public Water Supply	9 Dewatering	2 Irrigation	6 Oil Field Water Supply	10 Monitoring Well	3 Feedlot	7 Lawn and Garden (domestic)	11 Injection Well	4 Industrial	8 Air Conditioning	12 Other Air Sparge																																				
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6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout <u>3</u> Bentonite 4 Other _____ Grout Plug Intervals From <u>56</u> ft. to <u>3</u> ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.																																																					
What is the nearest source of possible contamination: <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%;">1 Septic tank</td> <td style="width: 33%;">6 Seepage pit</td> <td style="width: 33%;">11 Fuel storage</td> <td style="width: 33%;">16 Other (specify below)</td> </tr> <tr> <td>2 Sewer lines</td> <td>7 Pit privy</td> <td>12 Fertilizer storage</td> <td>_____</td> </tr> <tr> <td>3 Watertight sewer lines</td> <td>8 Sewage lagoon</td> <td>13 Insecticide storage</td> <td>_____</td> </tr> <tr> <td>4 Lateral lines</td> <td>9 Feedyard</td> <td>14 Abandoned water well</td> <td>_____</td> </tr> <tr> <td>5 Cess Pool</td> <td>10 Livestock pens</td> <td>15 Oil well/ Gas well</td> <td>_____</td> </tr> </table>						1 Septic tank	6 Seepage pit	11 Fuel storage	16 Other (specify below)	2 Sewer lines	7 Pit privy	12 Fertilizer storage	_____	3 Watertight sewer lines	8 Sewage lagoon	13 Insecticide storage	_____	4 Lateral lines	9 Feedyard	14 Abandoned water well	_____	5 Cess Pool	10 Livestock pens	15 Oil well/ Gas well	_____																												
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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>5 30 06</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>554</u> This Water Well Record was completed on (mo/day/yr) <u>6-23-06</u> under the business name of <u>Woofter Pump & Well Inc.</u> by (signature) <u>Jay G. Woofter</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.																																																					