

WATER WELL PLUGGING RECORD Form WWC-5P

KSA 82a-1212

ID NO.

1 LOCATION OF WATER WELL: County: <u>Finney</u>	Fraction <u>N 1/4 NW 1/4 NW 1/4</u>	Section Number <u>19</u>	Township Number <u>26</u>	Range Number <u>32</u> E <u>W</u>
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Distance and direction from nearest town or city street address of well if located within city?

12 Miles South of Garden City

2 WATER WELL OWNER: <u>KSNW</u> RR#, St. Address, Box #: <u>833 N. Main</u> City, State ZIP Code: <u>Wichita, KS 67220</u>	Global Positioning Systems (decimal degrees, min. of 4 digits) Latitude: _____ Longitude: _____ Elevation: _____ Datum: _____ Data Collection Method: _____
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3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX: <div style="text-align: center;"> </div>	4 DEPTH OF WELL <u>265</u> ft. WELL'S STATIC WATER LEVEL <u>251</u> ft. WELL WAS USED AS: <div style="display: flex; flex-wrap: wrap;"> <div style="width: 33%;"> <input checked="" type="checkbox"/> 1 Domestic <input type="checkbox"/> 2 Irrigation <input type="checkbox"/> 3 Feedlot <input type="checkbox"/> 4 Industrial </div> <div style="width: 33%;"> <input type="checkbox"/> 5 Public Water Supply <input type="checkbox"/> 6 Oil Field Water Supply <input type="checkbox"/> 7 Domestic (Lawn & Garden) <input type="checkbox"/> 8 Air Conditioning </div> <div style="width: 33%;"> <input type="checkbox"/> 9 Dewatering <input type="checkbox"/> 10 Monitoring <input type="checkbox"/> 11 Injection Well <input type="checkbox"/> 12 Other _____ </div> </div> Was a chemical/bacteriological sample submitted to Department? Yes _____ No <u>X</u>
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5 TYPE OF BLANK CASING USED: <input checked="" type="checkbox"/> 1 Steel <input type="checkbox"/> 3 RMP (SR) <input type="checkbox"/> 5 Wrought <input type="checkbox"/> 7 Fiberglass <input type="checkbox"/> 9 Other (Specify below) <input type="checkbox"/> 2 PVC <input type="checkbox"/> 4 ABS <input type="checkbox"/> 6 Asbestos-Cement <input type="checkbox"/> 8 Concrete Tile
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Blank casing diameter 5 in. Was casing pulled? Yes _____ No X If yes, how much _____
 Casing height above or below land surface 72 in.

6 GROUT PLUG MATERIAL: <input type="checkbox"/> 1 Neat cement <input type="checkbox"/> 2 Cement grout <input checked="" type="checkbox"/> 3 Bentonite <input type="checkbox"/> 4 Other _____
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Grout Plug Intervals: From 6 ft. to 11 ft., From _____ ft. to _____ ft., From _____ to _____ ft.

What is the nearest source of possible contamination:
☐ 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

Direction from well? East
 How many feet? 1,200

FROM	TO	PLUGGING MATERIALS	FROM	TO	PLUGGING MATERIALS
<u>265</u>	<u>251</u>	<u>Chlorinated Sand</u>			
<u>251</u>	<u>11</u>	<u>Clay/Soil</u>			
<u>11</u>	<u>6</u>	<u>Bentonite</u>			
<u>6</u>	<u>-</u>	<u>Cut-off Casing</u>			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 8-16-12 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 805. This Water Well Record was completed on (mo/day/year) 8-16-12 under the business name of Southwest Windmill by (signature) David [unclear]

INSTRUCTIONS: Use typewriter or ballpoint pen. Please press firmly and print clearly. Please fill in blanks, underline 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/geo/waterwells>.