

# WATER WELL PLUGGING RECORD Form WWC-5P

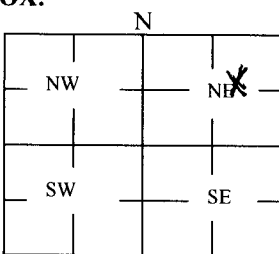
KSA 82a-1212

ID NO.

|   |   |                            |                                  |  |
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| 1 LOCATION OF WATER WELL:<br>County: <u>PRATT</u> | Fraction<br><u>1/4 SW 1/4 NE 1/4 NE 1/4</u> | Section Number<br><u>1</u> | Township Number<br>T <u>27</u> S | Range Number<br><u>12</u> <input type="checkbox"/> E <input checked="" type="checkbox"/> W |
|---|---|----------------------------|----------------------------------|--|

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| 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"/> <u>From Intersection of NE 60th St &amp; NE 90th Ave 1/4 mile south on NE 90th Ave then west 1/4 mile to well location</u> | Global Positioning Systems (GPS) information:<br>Latitude: _____ (in decimal degrees)<br>Longitude: _____ (in decimal degrees)<br>Elevation: _____<br>Horizontal Datum: <input type="checkbox"/> WGS84, <input type="checkbox"/> NAD83, <input type="checkbox"/> NAD27<br>Collection Method: _____ |
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| 2 WATER WELL OWNER: <u>Don Fisher</u><br>RR#, St. Address, Box #: <u>90124 NE 110th St</u><br>City, State ZIP Code: <u>Preston, KS 67583</u> | <input type="checkbox"/> GPS unit (Make/Model: _____)<br><input type="checkbox"/> Digital Map/Photo, <input type="checkbox"/> Topographic Map, <input type="checkbox"/> Land Survey<br>Est. Accuracy: <input type="checkbox"/> < 3 m, <input type="checkbox"/> 3-5 m, <input type="checkbox"/> 5-15 m, <input type="checkbox"/> > 15 m |
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| 3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:<br> | 4 DEPTH OF WELL <u>133</u> ft.<br>WELL'S STATIC WATER LEVEL <u>50</u> ft.<br>WELL WAS USED AS:<br><input type="checkbox"/> Domestic <input type="checkbox"/> Public Water Supply <input type="checkbox"/> Dewatering<br><input type="checkbox"/> Irrigation <input type="checkbox"/> Oil Field Water Supply <input checked="" type="checkbox"/> Monitoring<br><input type="checkbox"/> Feedlot <input type="checkbox"/> Domestic (Lawn & Garden) <input type="checkbox"/> Injection Well<br><input type="checkbox"/> Industrial <input type="checkbox"/> Air Conditioning <input type="checkbox"/> Other _____<br>Was a chemical/bacteriological sample submitted to Department? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> |
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| 5 TYPE OF BLANK CASING USED:<br><input type="checkbox"/> Steel <input type="checkbox"/> RMP (SR) <input type="checkbox"/> Wrought <input type="checkbox"/> Fiberglass <input type="checkbox"/> Other (Specify below)<br><input checked="" type="checkbox"/> PVC <input type="checkbox"/> ABS <input type="checkbox"/> Asbestos-Cement <input type="checkbox"/> Concrete Tile | Blank casing diameter <u>3</u> in. Was casing pulled? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> If yes, how much <u>4 ft</u><br>Casing height above or below land surface <u>48</u> in. |
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| 6 GROUT PLUG MATERIAL: <input type="checkbox"/> Neat cement <input type="checkbox"/> Cement grout <input checked="" type="checkbox"/> Bentonite <input type="checkbox"/> Other _____   | Grout Plug Intervals: From <u>50</u> ft. to <u>4</u> ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft. |
| What is the nearest source of possible contamination:<br><input type="checkbox"/> Septic tank <input type="checkbox"/> Seepage pit <input type="checkbox"/> Fuel storage <input checked="" type="checkbox"/> Other (specify below) <u>999</u><br><input type="checkbox"/> Sewer lines <input type="checkbox"/> Pit privy <input type="checkbox"/> Fertilizer storage<br><input type="checkbox"/> Watertight sewer lines <input type="checkbox"/> Sewage lagoon <input type="checkbox"/> Insecticide storage<br><input type="checkbox"/> Lateral lines <input type="checkbox"/> Feedyard <input type="checkbox"/> Abandoned water well Direction from well? _____<br><input type="checkbox"/> Cess pool <input type="checkbox"/> Livestock pens <input type="checkbox"/> Oil well/Gas well How many feet? _____ |  |

| FROM | TO | PLUGGING MATERIALS    | FROM | TO | PLUGGING MATERIALS |
|------|----|-----------------------|------|----|--------------------|
| 133  | 50 | Disinfected Fill Sand |      |    |                    |
| 50   | 4  | Bentonite             |      |    |                    |
| 4    | 0  | Natural Soil          |      |    |                    |
|      |    |                       |      |    |                    |
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|      |    |                       |      |    |                    |
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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>4-23-20</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>672</u> . This Water Well Record was completed on (mo/day/year) <u>4-24-20</u> under the business name of <u>Crowdis Water Well Svc</u> by (signature) <u>[Signature]</u> |
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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.