

Circle "11" Ag Well

WATER WELL PLUGGING RECORD

Form WWC-5P

KSA 82a-1212

ID No.

1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: <u>Ford</u>	<u>SW 1/4 NE 1/4 SW 1/4</u>	<u>16</u>	<u>27S</u>	<u>24W</u>

Distance and direction from nearest town or city street address of well if located within city?
from Primox Rd & 114th Rd, North 0.27 miles & East 0.32 GPS: 37.696028
99.955111

2 WATER WELL OWNER:	Board of Agriculture, Division of Water Resources
RR#, St. Address, Box #	Application Number:
City, State, ZIP Code	

3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4 DEPTH OF WELL															
<div style="display: flex; align-items: center;"> <div style="margin-right: 10px;">X</div> <div style="text-align: center;"> <p>N</p> <table border="1"> <tr> <td></td> <td></td> <td></td> </tr> <tr> <td>NW</td> <td></td> <td>NE</td> </tr> <tr> <td></td> <td></td> <td></td> </tr> <tr> <td>SW</td> <td></td> <td>SE</td> </tr> <tr> <td></td> <td></td> <td></td> </tr> </table> <p>S</p> </div> <div style="margin-left: 10px;">E</div> </div>				NW		NE				SW		SE				<u>170</u> ft.
NW		NE														
SW		SE														
	WELL'S STATIC WATER LEVEL															
	<u>115.5</u> ft.															
	WELL WAS USED AS:															
	<table border="0"> <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 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</td> </tr> </table>	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			
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	Was a chemical/bacteriological sample submitted to Department? Yes <u> </u> No <u>X</u>															
	If yes, mo/day/yr sample was submitted															
	Water Well Disinfected: Yes <u>X</u> No <u> </u>															

5 TYPE OF BLANK CASING USED:										
<table border="0"> <tr> <td>1 Steel</td> <td>3 RMP (SR)</td> <td>5 Wrought</td> <td>7 Fiberglass</td> <td>9 Other (specify below)</td> </tr> <tr> <td>2 PVC</td> <td>4 ABC</td> <td>6 Asbestos-Cement</td> <td>8 Concrete Tile</td> <td></td> </tr> </table>	1 Steel	3 RMP (SR)	5 Wrought	7 Fiberglass	9 Other (specify below)	2 PVC	4 ABC	6 Asbestos-Cement	8 Concrete Tile	
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Blank casing diameter <u>16</u> in.										
Was casing pulled? Yes <u>X</u> No <u> </u> If yes, how much <u>3 ft</u>										
Casing height above or below land surface <u>36</u> in.										

6 GROUT PLUG MATERIAL:																				
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Grout Plug Intervals From <u>3</u> ft. to <u>112</u> ft. From <u>115.5</u> ft. to <u>112</u> ft. From <u> </u> ft. to <u> </u> ft.																				
What is the nearest source of possible contamination:																				
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Direction from well? How many feet?

FROM	TO	CODE	PLUGGING MATERIALS
<u>170</u>	<u>115.5</u>		<u>Sand</u>
<u>115.5</u>	<u>112</u>		<u>Bentonite Hole Plug</u>
<u>112</u>	<u>3</u>		<u>Cement Grout</u>

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:
This water well was plugged under my jurisdiction and was completed on (mo/day/yr) <u>10/11/13</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>102</u> This Water Well Record was completed on (mo/day/yr) <u>10/23/13</u> under the business name of <u>LAYNE CHRISTENSEN COMPANY</u> by (signature) <u>[Signature]</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.