

# Plugging Report

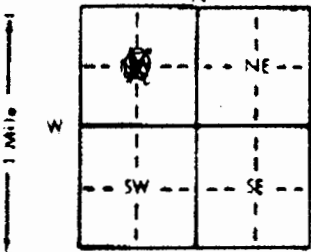
WATER WELL RECORD Form WWC-5 KSA 82a-1212

1 LOCATION OF WATER WELL: County <u>Gray</u>	Fraction <u>1/4 NE 1/4 NW 1/4</u>	Section Number <u>2</u>	Township Number <u>T 27 S</u>	Range Number <u>R 30 E</u>
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Distance and direction from nearest town or city street address of well if located within city?  
8 1/2 miles South of Juntura, OR - 112 W, 14-S, 14W

2 WATER WELL OWNER: <u>Ray Allen Smith</u>	Board of Agriculture, Division of Water Resources
RR#, St. Address, Box # <u>05505 S. Road</u>	Application Number: <u>19765</u>
City, State, ZIP Code <u>Juntura, KS 67853</u>	

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4 DEPTH OF COMPLETED WELL <u>206 ft.</u> ELEVATION:
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Depth(s) Groundwater Encountered 1. \_\_\_\_\_ ft. 2. \_\_\_\_\_ ft. 3. \_\_\_\_\_ ft.

WELL'S STATIC WATER LEVEL 146 ft. below land surface measured on mo/day/yr

Pump test data: Well water was \_\_\_\_\_ ft. after \_\_\_\_\_ hours pumping \_\_\_\_\_ gpm

Est. Yield \_\_\_\_\_ gpm: Well water was \_\_\_\_\_ ft. after \_\_\_\_\_ hours pumping \_\_\_\_\_ gpm

Bore Hole Diameter \_\_\_\_\_ in. to \_\_\_\_\_ ft. and \_\_\_\_\_ in. to \_\_\_\_\_ ft.

WELL WATER TO BE USED AS:

5 Public water supply	8 Air conditioning	11 Injection well
1 Domestic	3 Feedlot	6 Oil field water supply
2 Irrigation	4 Industrial	7 Lawn and garden only
		10 Monitoring well

12 Other (Specify below) \_\_\_\_\_

Was a chemical/bacteriological sample submitted to Department? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, mo/day/yr sample was submitted \_\_\_\_\_

Water Well Disinfected? Yes \_\_\_\_\_ No \_\_\_\_\_

5 TYPE OF BLANK CASING USED:	5 Wrought iron	8 Concrete tile	CASING JOINTS: Glued _____ Clamped _____
<u>1 Steel</u>	3 RMP (SR)	6 Asbestos-Cement	9 Other (specify below) _____
2 PVC	4 ABS	7 Fiberglass	10 Asbestos-cement
			11 Other (specify) _____
			12 None used (open hole)

Blank casing diameter \_\_\_\_\_ in. to \_\_\_\_\_ ft. Dia \_\_\_\_\_ in. to \_\_\_\_\_ ft. Dia \_\_\_\_\_ in. to \_\_\_\_\_ ft.

Casing height above land surface \_\_\_\_\_ in. weight \_\_\_\_\_ lbs./ft. Wall thickness or gauge No. \_\_\_\_\_

TYPE OF SCREEN OR PERFORATION MATERIAL:	7 PVC	10 Asbestos-cement
<u>1 Steel</u>	8 RMP (SR)	11 Other (specify) _____
2 Brass	9 ABS	12 None used (open hole)
3 Stainless steel		
4 Galvanized steel		

SCREEN OR PERFORATION OPENINGS ARE:	5 Gauzed wrapped	8 Saw cut	11 None (open hole)
1 Continuous slot	6 Wire wrapped	9 Drilled holes	
2 Louvered shutter	7 Torch cut	10 Other (specify) _____	
4 Key punched			

SCREEN-PERFORATED INTERVALS:	From _____ ft. to _____ ft.	From _____ ft. to _____ ft.	From _____ ft. to _____ ft.
GRAVEL PACK INTERVALS:	From _____ ft. to _____ ft.	From _____ ft. to _____ ft.	From _____ ft. to _____ ft.

3 GROUT MATERIAL:	1 Neat cement	2 Cement grout	3 Bentonite	4 Other
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Grout Intervals: From 5 ft. to 15 ft. From \_\_\_\_\_ ft. to \_\_\_\_\_ ft. From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

What is the nearest source of possible contamination:

1 Septic tank	4 Lateral lines	7 Pit privy	10 Livestock pens	14 Abandoned water well
2 Sewer lines	5 Cess pool	8 Sewage lagoon	11 Fuel storage	15 Oil well/Gas well
3 Watertight sewer lines	6 Seepage pit	9 Feedyard	12 Fertilizer storage	16 Other (specify below) _____
			13 Insecticide storage	

Direction from well? <u>N</u>	FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
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FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
206	146	Chlorinated gravel			
146	136	Bentonite clay			
136	15 ft	Sandy clayish - Inert material			
15	5 ft	Cement grout			
5	0 ft	Smoothed out surface material			

RECEIVED

AUG 21 1998

BUREAU OF WATER

CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) _____ and this record is true to the best of my knowledge and belief. Kansas	
Water Well Contractor's License No. _____	This Water Well Record was completed on (mo/day/yr) <u>8-19-98</u>
under the business name of _____	by (signature) <u>Ray Allen Smith</u>

INSTRUCTIONS: Use typewriter or ball point 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, Topeka, Kansas 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.