

WATER WELL PLUGGING RECORD Form WWC-5P KSA 82a-1212 ID NO.

1 LOCATION OF WATER WELL: County: Kiowa	Fraction NW 1/4 NW 1/4 SE 1/4	Section Number 16	Township Number 28	Range Number 18 W
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Distance and direction from nearest town or city street address of well if located within city?

City limits- Pine St. & US 54-400

2 WATER WELL OWNER: Peoples Bank RR#, St. Address, Box #: 202 S. Main St. City, State ZIP Code: Greensburg, Ks. 67054	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>5 @ 200</u> ft. WELL'S STATIC WATER LEVEL <u>97</u> ft. WELL WAS USED AS: <table style="width: 100%; border: none;"> <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</td> </tr> <tr> <td>3 Feedlot</td> <td>7 Domestic (Lawn & Garden)</td> <td>11 Injection Well</td> </tr> <tr> <td>4 Industrial</td> <td>8 Air Conditioning</td> <td><input checked="" type="checkbox"/> Other Geothermal</td> </tr> </table> <p>Was a chemical/bacteriological sample submitted to Department? Yes _____ No <input checked="" type="checkbox"/></p>	1 Domestic	5 Public Water Supply	9 Dewatering	2 Irrigation	6 Oil Field Water Supply	10 Monitoring	3 Feedlot	7 Domestic (Lawn & Garden)	11 Injection Well	4 Industrial	8 Air Conditioning	<input checked="" type="checkbox"/> Other Geothermal
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5 TYPE OF BLANK CASING USED:

1 Steel	3 RMP (SR)	5 Wrought	7 Fiberglass	<input checked="" type="checkbox"/> Other (Specify below)
2 PVC	4 ABS	6 Asbestos-Cement	8 Concrete Tile	<u>Polyethylene</u>

Blank casing diameter 3/4 in. Was casing pulled? Yes _____ No If yes, how much _____
 Casing height above or below land surface 60 in.

6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout Bentonite 4 Other _____

Grout Plug Intervals: From 4 ft. to 200 ft., From _____ ft. to _____ ft., From _____ to _____ ft.

X 5

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	_____
<input checked="" type="checkbox"/> Watertight sewer lines	8 Sewage lagoon	13 Insecticide storage	_____
4 Lateral lines	9 Feedyard	14 Abandoned water well	Direction from well? <u>South</u>
5 Cess pool	10 Livestock pens	15 Oil well/Gas well	How many feet? <u>100</u>

FROM	TO	PLUGGING MATERIALS	FROM	TO	PLUGGING MATERIALS
0	5	Topsoil			
5	58	Clay, tan			
58	103	Sand, fine to coarse			
103	135	Sandstone, tan			
135	200	Shale, gray			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 11/13/09 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 138. This Water Well Record was completed on (mo/day/year) 11/17/09 under the business name of **Peterson Irrigation, Inc.** by (signature) *Mike Peterson*

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>.