

## WATER WELL PLUGGING RECORD Form WWC-5P

KSA 82a-1212

ID NO.

8723 &amp; HS 04

<b>1 LOCATION OF WATER WELL:</b> County: Haskell	<b>Fraction</b> 1/4 1/4 SW 1/4	<b>Section Number</b> 2	<b>Township Number</b> T 28 S	<b>Range Number</b> 31 <input type="checkbox"/> E <input checked="" type="checkbox"/> W																																																
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"/> Approx. 16 miles south of Pierceville		Global Positioning Systems (GPS) information: Latitude: <del>37.28274</del> 37.638372 (in decimal degrees) Longitude: <del>100.44020</del> -100.68424 (in decimal degrees) Elevation: Datum: <input type="checkbox"/> WGS84, <input type="checkbox"/> NAD83, <input checked="" type="checkbox"/> NAD27 Collection Method: <input checked="" type="checkbox"/> GPS unit (Make/Model: Magellan eXplorist) <input type="checkbox"/> Digital Map/Photo, <input type="checkbox"/> Topographic Map, <input type="checkbox"/> Land Survey Est. Accuracy: <input type="checkbox"/> < 3 m, <input type="checkbox"/> 3-5 m, <input type="checkbox"/> 5-15 m, <input type="checkbox"/> > 15 m																																																		
<b>2 WATER WELL OWNER:</b> Merle D Schmidt RR#, St. Address, Box #: 798 WW Road City, State ZIP Code: Copeland Ks. 67837																																																				
<b>3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:</b> <div style="text-align:center">N NW NE W SW SE E S</div> <div style="position: absolute; left: 100px; top: 350px;">X</div>		<b>4 DEPTH OF WELL</b> 362 ft. <b>WELL'S STATIC WATER LEVEL</b> 326 ft. <b>WELL WAS USED AS:</b> <table style="width:100%"><tr><td><input type="checkbox"/> Domestic</td><td><input type="checkbox"/> Public Water Supply</td><td><input type="checkbox"/> Dewatering</td></tr><tr><td><input checked="" type="checkbox"/> Irrigation</td><td><input type="checkbox"/> Oil Field Water Supply</td><td><input type="checkbox"/> Monitoring</td></tr><tr><td><input type="checkbox"/> Feedlot</td><td><input type="checkbox"/> Domestic (Lawn &amp; Garden)</td><td><input type="checkbox"/> Injection Well</td></tr><tr><td><input type="checkbox"/> Industrial</td><td><input type="checkbox"/> Air Conditioning</td><td><input type="checkbox"/> Other _____</td></tr></table> Was a chemical/bacteriological sample submitted to Department? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>			<input type="checkbox"/> Domestic	<input type="checkbox"/> Public Water Supply	<input type="checkbox"/> Dewatering	<input checked="" type="checkbox"/> Irrigation	<input type="checkbox"/> Oil Field Water Supply	<input type="checkbox"/> Monitoring	<input type="checkbox"/> Feedlot	<input type="checkbox"/> Domestic (Lawn & Garden)	<input type="checkbox"/> Injection Well	<input type="checkbox"/> Industrial	<input type="checkbox"/> Air Conditioning	<input type="checkbox"/> Other _____																																				
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<b>5 TYPE OF BLANK CASING USED:</b> <table style="width:100%"><tr><td><input checked="" type="checkbox"/> Steel</td><td><input type="checkbox"/> RMP (SR)</td><td><input type="checkbox"/> Wrought</td><td><input type="checkbox"/> Fiberglass</td><td><input type="checkbox"/> Other (Specify below) _____</td></tr><tr><td><input type="checkbox"/> PVC</td><td><input type="checkbox"/> ABS</td><td><input type="checkbox"/> Asbestos-Cement</td><td><input type="checkbox"/> Concrete Tile</td><td></td></tr></table> Blank casing diameter 16 in. Was casing pulled? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> If yes, how much 60" Casing height above or below land surface Below 60 in.					<input checked="" type="checkbox"/> Steel	<input type="checkbox"/> RMP (SR)	<input type="checkbox"/> Wrought	<input type="checkbox"/> Fiberglass	<input type="checkbox"/> Other (Specify below) _____	<input type="checkbox"/> PVC	<input type="checkbox"/> ABS	<input type="checkbox"/> Asbestos-Cement	<input type="checkbox"/> Concrete Tile																																							
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<b>6 GROUT PLUG MATERIAL:</b> <input type="checkbox"/> Neat cement <input checked="" type="checkbox"/> Cement grout <input checked="" type="checkbox"/> Bentonite <input type="checkbox"/> Other _____ Grout Plug Intervals: From 8' 6" ft. to 4 ft., From 220 ft. to 207 ft., From _____ to _____ ft. What is the nearest source of possible contamination: <table style="width:100%"><tr><td><input type="checkbox"/> Septic tank</td><td><input type="checkbox"/> Seepage pit</td><td><input type="checkbox"/> Fuel Storage</td><td rowspan="5"><input checked="" type="checkbox"/> Other (specify below) None Observed  Direction from well? _____ How many feet? _____</td></tr><tr><td><input type="checkbox"/> Sewer lines</td><td><input type="checkbox"/> Pit privy</td><td><input type="checkbox"/> Fertilizer storage</td></tr><tr><td><input type="checkbox"/> Watertight sewer lines</td><td><input type="checkbox"/> Sewage lagoon</td><td><input type="checkbox"/> Insecticide storage</td></tr><tr><td><input type="checkbox"/> Lateral lines</td><td><input type="checkbox"/> Feedyard</td><td><input type="checkbox"/> Abandoned water well</td></tr><tr><td><input type="checkbox"/> Cess pool</td><td><input type="checkbox"/> Livestock pens</td><td><input type="checkbox"/> Oil well/Gas well</td></tr></table>					<input type="checkbox"/> Septic tank	<input type="checkbox"/> Seepage pit	<input type="checkbox"/> Fuel Storage	<input checked="" type="checkbox"/> Other (specify below) None Observed  Direction from well? _____ How many feet? _____	<input type="checkbox"/> Sewer lines	<input type="checkbox"/> Pit privy	<input type="checkbox"/> Fertilizer storage	<input type="checkbox"/> Watertight sewer lines	<input type="checkbox"/> Sewage lagoon	<input type="checkbox"/> Insecticide storage	<input type="checkbox"/> Lateral lines	<input type="checkbox"/> Feedyard	<input type="checkbox"/> Abandoned water well	<input type="checkbox"/> Cess pool	<input type="checkbox"/> Livestock pens	<input type="checkbox"/> Oil well/Gas well																																
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<b>7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:</b> This water well was plugged under my jurisdiction and was completed on (mo/day/year) 6-23-2012 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/year) 6-29-2012 under the business name of Merle Schmidt by (signature) Merle Schmidt <i>Merle Schmidt</i>																																																				
<b>INSTRUCTIONS:</b> 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: 785/296-5524. Send one to Water Well Owner and retain one for your records. Visit us at <a href="http://www.kdheks.gov/watervell/index.html">http://www.kdheks.gov/watervell/index.html</a> .																																																				

Check one: ☐ White Copy ☐ Blue Copy ☐ Pink Copy