

WATER WELL PLUGGING RECORD Form WWC-5P

KSA 82a-1212

ID NO.

1 LOCATION OF WATER WELL: County: Ford	Fraction NE 1/4 NE 1/4 NE 1/4 NE 1/4	Section Number 05	Township Number T 29 S	Range Number 21 <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 ☒ 319 Bollinger Rd,

Global Positioning Systems (GPS) information:

Latitude: 37.55636 (in decimal degrees)

Longitude: 99.63239 (in decimal degrees)

Elevation: 2411

Datum: ☒ WGS84, ☐ NAD83, ☐ NAD27

Collection Method:

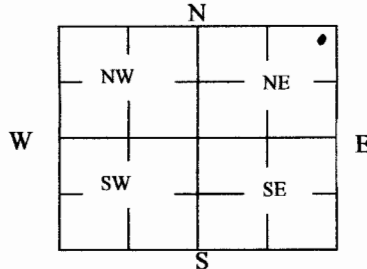
☒ GPS unit (Make/Model: Garmin GPS 72

☐ Digital Map/Photo, ☐ Topographic Map, ☐ Land Survey

Est. Accuracy: ☐ < 3 m, ☒ 3-5 m, ☐ 5-15 m, ☐ > 15 m

2 WATER WELL OWNER: Mr Eldon Smith
RR#, St. Address, Box #: 319 Bollinger Road
City, State ZIP Code: Bucklin, KS 67834

3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:



4 DEPTH OF WELL unknown ft.

WELL'S STATIC WATER LEVE no water ft

WELL WAS USED AS:

☒ Domestic
☐ Irrigation
☐ Feedlot
☐ Industrial

☐ Public Water Supply
☐ Oil Field Water Supply
☐ Domestic (Lawn & Garden)
☐ Air Conditioning

☐ Dewatering
☐ Monitoring
☐ Injection Well
☐ Other

Was a chemical/bacteriological sample submitted to Department? Yes ☐ No ☐

5 TYPE OF BLANK CASING USED:

☒ Steel ☐ RMP (SR) ☐ Wrought ☐ Fiberglass ☐ Other (Specify below)
☐ PVC ☐ ABS ☐ Asbestos-Cement ☐ Concrete Tile

Blank casing diameter 2 in. Was casing pulled? Yes ☐ No ☒ If yes, how much _____
Casing height below or below land surface below 60" in.

6 GROUT PLUG MATERIAL: ☐ Neat cement ☐ Cement grout ☐ Bentonite ☒ Other clay, soil, 2" cap

Grout Plug Intervals: From botto ft. to top ft., From _____ ft. to _____ ft., From _____ to _____ ft.

What is the nearest source of possible contamination:

☒ Septic tank ☒ Seepage pit ☐ Fuel Storage ☐ Other (specify below)
☐ Sewer lines ☐ Pit privy ☐ Fertilizer storage
☐ Watertight sewer lines ☐ Sewage lagoon ☐ Insecticide storage
☒ Lateral lines ☐ Feedyard ☐ Abandoned water well Direction from well? West
☒ Cess pool ☐ Livestock pens ☐ Oil well/Gas well How many feet? 15 feet

FROM	TO	PLUGGING MATERIALS	FROM	TO	PLUGGING MATERIALS
botto	top	Sand, soil, clay 2" cap			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 06/18/2009 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) 06/22/2009 under the business name of Ford County Planning, Zoning & En. Health, Sanitarian by (signature) [Signature]

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: 785/296-5524. Send one to Water Well Owner and retain one for your records. Visit us at <http://www.kdheks.gov/waterwell/index.html>.

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