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

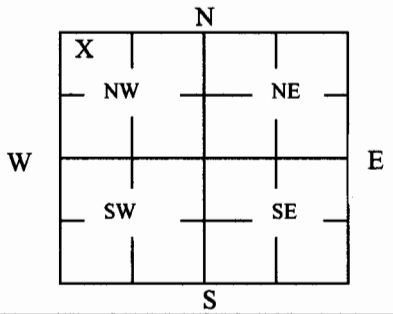
1 LOCATION OF WATER WELL: County: **Stanton**	Fraction **NW ¼ NW ¼ NW¼**	Section Number **02**	Township Number 29	Range Number **39 (W)**

Distance and direction from nearest town or city street address of well if located within city?
951 South Big Bow Grade, Big Bow, Kansas

2 WATER WELL OWNER:
ADM-Collingwood Grain – Dennis Hickman
RR#, St. Address, Box #:
816 N. Halstead
City, State ZIP Code:
Hutchinson, KS 67501

Global Positioning Systems (decimal degrees, min. of 4 digits
Latitude: _____
Longitude: _____
Elevation: _____
Datum: _____
Data Collection Method:

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



4 DEPTH OF WELL _____176.0_____ ft.

WELL'S STATIC WATER LEVEL _____133.9_____ ft

WELL WAS USED AS:

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 12 Other _____

Was a chemical/bacteriological sample submitted to Department? Yes_____ No __X__

5 TYPE OF BLANK CASING USED:
1 Steel 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (Specify below)
2 PVC 4 ABS 6 Asbestos-Cement 8 Concrete Tile _____

Blank casing diameter ___4___ in. Was casing pulled? Yes ___X___ No _____ If yes, how much __3 Feet_____
Casing height above or below land surface _____ in.

6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout **3 Bentonite** 4 Other _____

Grout Plug Intervals: From ___3___ ft. to __176__ ft., From _____ ft. to _____ft., From _____ to _____ ft.

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 **__Lust Site_____**
3 Watertight sewer lines 8 Sewage lagoon 13 Insecticide storage
4 Lateral lines 9 Feedyard 14 Abandoned water well Direction from well? _____
5 Cess pool 10 Livestock pens 15 Oil well/Gas well How many feet? _____

FROM	TO	PLUGGING MATERIALS	FROM	TO	PLUGGING MATERIALS
0	**3**	**Native Soil**			
3	**176**	**Bentonite Grout**			
					MW 1

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) _____**10/30/2008**____ and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. __**594**___. This Water Well Record was completed on (mo/day/year) ___11/20/08___ under the business name of **Coranco Great Plains, Inc.** by (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: 785/296-5522. Send one to Water Well Owner and retain one for your records. Visit us at http://www.kdheks.gov/waterwell/index.html.