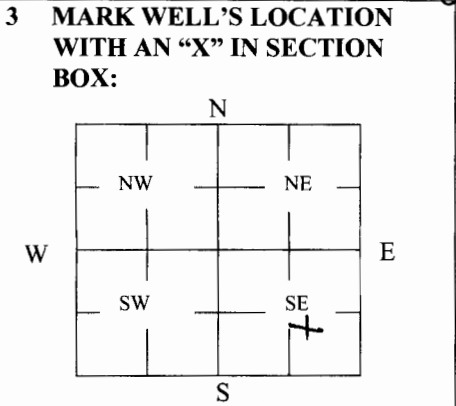


**WATER WELL PLUGGING RECORD Form WWC-5P KSA 82a-1212 ID NO.**

**1 LOCATION OF WATER WELL:**  
 County: Remond Fraction SE  $\frac{1}{4}$   $\frac{1}{4}$   $\frac{1}{4}$  Section Number 28 Township Number 2 Range Number 11 E/W  
 Distance and direction from nearest town or city street address of well if located within city?

**2 WATER WELL OWNER:** John Williams  
 RR#, St. Address, Box #: 3802nd St  
 City, State ZIP Code: Ballwin Mo 63011  
**Global Positioning Systems** (decimal degrees, min. of 4 digits)  
 Latitude: \_\_\_\_\_  
 Longitude: \_\_\_\_\_  
 Elevation: \_\_\_\_\_  
 Datum: \_\_\_\_\_  
 Data Collection Method: \_\_\_\_\_



**4 DEPTH OF WELL** 79 ft.  
 WELL'S STATIC WATER LEVEL 70 ft.  
 WELL WAS USED AS:  
 1 Domestic  
 2 Irrigation  
 3 Feedlot  
 4 Industrial  
 5 Public Water Supply  
 6 Oil Field Water Supply  
 7 Domestic (Lawn & Garden)  
 8 Air Conditioning  
 9 Dewatering  
 10 Monitoring  
 11 Injection Well  
 12 Other \_\_\_\_\_  
 Was a chemical/bacteriological sample submitted to Department? Yes \_\_\_ No \_\_\_

**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 13 in. Was casing pulled? Yes  No \_\_\_ If yes, how much 3ft.  
 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 6 ft. to 3 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  
 3 Watertight sewer lines 8 Sewage lagoon 13 Insecticide storage  
 4 Lateral lines 9 Feedyard 14 Abandoned water well Direction from well? West  
 5 Cess pool 10 Livestock pens 15 Oil well/Gas well How many feet? <100ft

FROM	TO	PLUGGING MATERIALS	FROM	TO	PLUGGING MATERIALS
76	9	4.6 gallons Chlorine			
76	9	2.4 cu yards sand			
9	6	Subsoil			
6	3	bentonite plug			
3	top	top soil			

**7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:** This water well was 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/year) \_\_\_\_\_ under the business name of \_\_\_\_\_ by (signature) John S. Williams

**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>.