

## WATER WELL PLUGGING RECORD

Form WWC-5P

KSA 82a-1212

ID No.

<b>1</b> LOCATION OF WATER WELL:	Fraction <b>SW 1/4 NE 1/4 SW 1/4</b>	Section Number <b>28</b>	Township Number <b>2</b>	Range Number <b>26W</b>
County: <b>Decatur</b>				
Distance and direction from nearest town or city street address of well if located within city?				
<b>2</b> WATER WELL OWNER: <b>Herbert Shirley</b>				
RR#, St. Address, Box # <b>PO Box 61</b>				
City, State, ZIP Code : <b>Oberlin, KS 67749</b>				
Board of Agriculture, Division of Water Resources Application Number:				
<b>3</b> MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:	<b>4</b> DEPTH OF WELL <b>175</b> ft.			
	WELL'S STATIC WATER LEVEL <b>91</b> ft.			
	WELL WAS USED AS:			
	<div style="display: flex; justify-content: space-between;"> <div> 1 Domestic 2 Irrigation 3 Feedlot 4 Industrial </div> <div> 5 Public Water Supply  <input checked="" type="radio"/> 6 Oil Field Water Supply  7 Lawn and Garden (domestic)  8 Air Conditioning </div> <div> 9 Dewatering 10 Monitoring Well 11 Injection Well 12 Other </div> </div>			
	Was a chemical/bacteriological sample submitted to Department? Yes _____ No <input checked="" type="checkbox"/> If yes, mo/day/yr sample was submitted _____ Water Well Disinfected: Yes <input checked="" type="checkbox"/> No _____			
<b>5</b> TYPE OF BLANK CASING USED:				
1 Steel      3 RMP (SR)      5 Wrought      7 Fiberglass      9 Other (specify below) <input checked="" type="checkbox"/> 2 PVC      4 ABC      6 Asbestos-Cement      8 Concrete Tile				
Blank casing diameter <b>4.5</b> in. Was casing pulled? Yes _____ No <input checked="" type="checkbox"/> If yes, how much _____				
Casing height above or below land surface <b>-36</b> in.				
<b>6</b> GROUT PLUG MATERIAL: 1 Neat cement    2 Cement grout <input checked="" type="radio"/> 3 Bentonite    4 Other _____				
Grout Plug Intervals From <b>0</b> ft. to <b>3</b> ft. From <b>88</b> ft. to <b>91</b> ft. From _____ ft. 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 5 Cess Pool      10 Livestock pens      15 Oil well/ Gas well				
Direction from well? _____ How many feet? _____				
FROM	TO	CODE	PLUGGING MATERIALS	
<b>0</b>	<b>3</b>		<b>Clay</b>	
<b>3</b>	<b>6</b>		<b>Bentonite</b>	
<b>6</b>	<b>88</b>		<b>Clay</b>	
<b>88</b>	<b>91</b>		<b>Bentonite</b>	
<b>91</b>	<b>175</b>		<i>Chlorinated Sand</i>	
<b>7</b> CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/yr) <b>3/18/09</b> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <b>783</b> This Water Well Record was completed on (mo/day/yr) <b>3/24/09</b> under the business name of <b>Woofter Pump &amp; Well, Inc.</b> by (signature) <i>[Signature]</i>				
INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment, Bureau of Water, 1000 S W Jackson St., Ste. 420, Topeka, Kansas 66620-0001. Telephone: 785-296-3565. Send one to Water Well Owner and retain one for your records.				