

**WATER WELL PLUGGING RECORD Form WWC-5P**

KSA 82a-1212 ID NO.

SVE-8

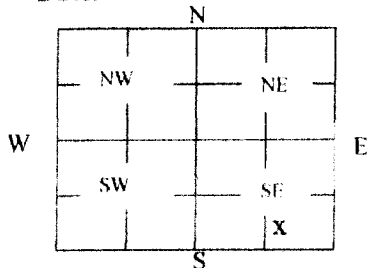
<b>1 LOCATION OF WATER WELL:</b> County: <b>Seward</b>	Fraction <b>NW 1/4 SE 1/4 SE 1/4 1/4</b>	Section Number <b>23</b>	Township Number <b>T 33 S</b>	Range Number <b>32</b> <input type="checkbox"/> E <input checked="" type="checkbox"/> W
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Street/Rural Address of Well Location: if unknown, distance & direction from nearest town or intersection: If at owner's address, check here  Well is located approximately 13 miles northeast of Liberal, on County Road R, just off U.S. Highway 54.

**Global Positioning Systems (GPS) information:**  
 Latitude: 37.1553602522 (in decimal degrees)  
 Longitude: -100.761266141 (in decimal degrees)  
 Elevation: 2567.7 feet (Horizontal Datum: NAVD88)  
 Horizontal Datum:  WGS84,  NAD83,  NAD27  
 Collection Method:  
 GPS unit (Make/Model: \_\_\_\_\_)  
 Digital Map/Photo.  Topographic Map.  Land Survey  
 Est. Accuracy:  < 3 m.  3-5 m.  5-15 m.  > 15 m

**2 WATER WELL OWNER:** Merit Energy  
 RR#. St. Address. Box #: 13727 Noel Road, Suite 1200  
 City, State ZIP Code: Dallas, Texas 75240

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



**4 DEPTH OF WELL** 23.6 ft.

WELL'S STATIC WATER LEVEL NA ft

WELL WAS USED AS:

- |  |   |  |
|--|---|--|
| <input type="checkbox"/> Domestic Irrigation | <input type="checkbox"/> Public Water Supply      | <input type="checkbox"/> Dewatering                  |
| <input type="checkbox"/> Feedlot             | <input type="checkbox"/> Oil Field Water Supply   | <input type="checkbox"/> Monitoring                  |
| <input type="checkbox"/> Industrial          | <input type="checkbox"/> Domestic (Lawn & Garden) | <input checked="" type="checkbox"/> Injection Well   |
|  | <input type="checkbox"/> Air Conditioning         | <input checked="" type="checkbox"/> Other <u>SVE</u> |

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

**5 TYPE OF BLANK CASING USED:**

- |   |                                       |  |   |  |
|---|---------------------------------------|--|---|--|
| <input checked="" type="checkbox"/> Steel PVC | <input type="checkbox"/> RMP (SR) ABS | <input type="checkbox"/> Wrought Asbestos-Cement | <input type="checkbox"/> Fiberglass Concrete Tile | <input type="checkbox"/> Other (Specify below) _____ |
|---|---------------------------------------|--|---|--|

Blank casing diameter 4 in. Was casing pulled? Yes  No  If yes, how much Top 3 feet pulled.  
 Casing height above or below land surface \_\_\_\_\_ in.

**6 GROUT PLUG MATERIAL:**  Neat cement  Cement grout  Bentonite  Other \_\_\_\_\_

Grout Plug Intervals: From \_\_\_\_\_ ft. to \_\_\_\_\_ ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

What is the nearest source of possible contamination:

- |   |   |   |  |
|---|---|---|--|
| <input type="checkbox"/> Septic tank            | <input type="checkbox"/> Seepage pit    | <input type="checkbox"/> Fuel storage         | <input type="checkbox"/> Other (specify below) _____ |
| <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 | Direction from well? _____                           |
| <input type="checkbox"/> Cess pool              | <input type="checkbox"/> Livestock pens | <input type="checkbox"/> Oil well/Gas well    | How many feet? _____                                 |

FROM	TO	PLUGGING MATERIALS	FROM	TO	PLUGGING MATERIALS
23.6	3	Benonite Hydrated			
3	0	Native			

**7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:** This water well was plugged under my jurisdiction and was completed on (mo/day/year) 10/18/2017 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 597. This Water Well Record was completed on (mo/day/year) 11/8/2017 under the business name of Cascade by (signature) \_\_\_\_\_

Send one white copy to Kansas Department of Health & Environment, Geology Section, 1000 SW Jackson Street, Ste. 420, Topeka, KS 66612-1367. Send one copy to WATER WELL OWNER and retain one for your records.  
 Visit us at <http://www.kdheks.gov/waterwell/index.html> Telephone 785-296-5524.