

## WATER WELL PLUGGING RECORD

Form WWC-5P

KSA 82a-1212

ID NO.

1 LOCATION OF WATER WELL: Fraction  $\frac{1}{4}$   $\frac{1}{4}$   $\frac{1}{4}$  SE  $\frac{1}{4}$  Section Number 26 Township Number T 4 S Range Number 16 ☐ E ☒ W

Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here ☐ 1 mile East &  $\frac{1}{4}$  mile north of Kirwin, KS

## Global Positioning Systems (GPS) information:

Latitude: 39° 40' 24.0" (in decimal degrees)Longitude: 99° 05' 29.9" (in decimal degrees)

Elevation:

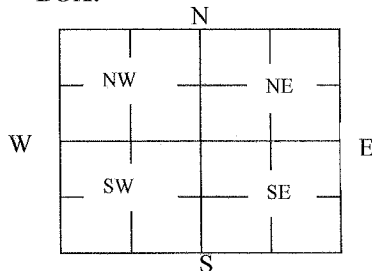
Datum: ☐ WGS84, ☐ NAD83, ☒ NAD27

Collection Method:

☒ GPS unit (Make/Model: Hand Held)☐ Digital Map/Photo, ☐ Topographic Map, ☐ Land SurveyEst. Accuracy: ☐ < 3 m, ☐ 3-5 m, ☐ 5-15 m, ☐ > 15 m

2 WATER WELL OWNER: Daryl Slavik  
RR#, St. Address, Box #: 19081 B Road  
City, State ZIP Code: Kensington, KS 66951

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

4 DEPTH OF WELL 86 ft.WELL'S STATIC WATER LEVEL 22 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  
☐ PVC☐ RMP (SR)  
☐ ABS☒ Wrought  
☒ Asbestos-Cement☐ Fiberglass  
☐ Concrete Tile☐ Other (Specify below)Blank casing diameter 16 in. Was casing pulled? Yes ☐ No ☒ If yes, how much

Casing height above or below land surface \_\_\_\_\_ in.

6 GROUT PLUG MATERIAL: ☐ Neat cement ☐ Cement grout ☒ Bentonite ☐ OtherGrout Plug Intervals: From 3 ft. to 8 ft., From 17 ft. to 22 ft., From \_\_\_\_\_ to \_\_\_\_\_ ft.

What is the nearest source of possible contamination:

☐ Septic tank  
☐ Sewer lines  
☐ Watertight sewer lines  
☐ Lateral lines  
☐ Cess pool

☐ Seepage pit  
☐ Pit privy  
☐ Sewage lagoon  
☐ Feedyard  
☐ Livestock pens

☐ Fuel Storage  
☐ Fertilizer storage  
☐ Insecticide storage  
☐ Abandoned water well  
☐ Oil well/Gas well
☐ Other (specify below)

Direction from well? \_\_\_\_\_

How many feet? \_\_\_\_\_

FROM	TO	PLUGGING MATERIALS	FROM	TO	PLUGGING MATERIALS
0	3	Native Soil			
3	8	Bentonite			
8	17	Chlorinated gravel			
17	22	Bentonite			
22	86	Chlorinated gravel			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 4-15-13 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 433. This Water Well Record was completed on (mo/day/year) 4-16-13 under the business name of Sargent Irrigation Co. by (signature) Gregory Payne

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