

WATER WELL PLUGGING RECORD

FORM WWC-5P

KSA 82a-1212

1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number																																				
County: Decatur	SE 1/4 NW 1/4 NE 1/4	21	5	29 W																																				
Distance and direction from nearest town or city street address of well if located within city?																																								
2 WATER WELL OWNER Alberta Morgan Trust																																								
RR#, St. Address, Box # 1440 West 90th Ave																																								
City, State, ZIP Code : Lenexa, KS 66215																																								
Board of Agriculture, Division of Water Resources Application Number: 20080067																																								
3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4 DEPTH OF WELL 130 ft.																																							
N <table border="1" style="margin: auto; border-collapse: collapse;"> <tr> <td style="width: 50px; height: 50px;"></td> <td style="width: 50px; height: 50px; text-align: center;">X</td> </tr> <tr> <td style="text-align: center;">NW</td> <td style="text-align: center;">NE</td> </tr> <tr> <td style="width: 50px; height: 50px;"></td> <td style="width: 50px; height: 50px;"></td> </tr> <tr> <td style="text-align: center;">SW</td> <td style="text-align: center;">SE</td> </tr> </table> S W E		X	NW	NE			SW	SE	WELL'S STATIC WATER LEVEL 65 ft.																															
		X																																						
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WELL WAS USED AS:																																								
1 Domestic 2 Irrigation 3 Feedlot 4 Industrial 5 Public Water Supply ☒ 6 Oil Field Water Supply 7 Lawn and Garden (domestic) 8 9 Dewatering 10 Monitoring Well 11 Injection Well 12 Other																																								
Was a chemical/bacteriological sample submitted to Department? Yes _____ No ☒																																								
If yes, mo/day/yr sample was submitted _____																																								
Water Well Disinfected: Yes ☒ No _____																																								
5 TYPE OF BLANK CASING USED:																																								
1 Steel 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (specify below) ☒ 2 PVC 4 ABC 6 Asbestos-Cement 8 Concrete Tile																																								
Blank casing diameter 4.5 in. Was casing pulled? Yes _____ No ☒ If yes, how much _____																																								
Casing height above or below land surface -36 in.																																								
6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout <u>3 Bentonite</u> 4 Other _____																																								
Grout Plug Intervals From 3 ft. to 6 ft. From 62 ft. to 65 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 13 Insecticide storage 3 Watertight sewer lines 8 Sewage lagoon 14 Abandoned water well 4 Lateral lines 9 Feedyard 15 Oil well/ Gas well 5 Cess Pool 10 Livestock pens																																								
Direction from well? _____ How many feet? _____																																								
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7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/yr) 9/12/08 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 554/783 This Water Well Record was completed on (mo/day/yr) 9/01/09 under the business name of Woofert Pump & Well Inc.																																								
by (signature) <i>D. B. [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, Topeka, Kansas 66620-0001. Telephone: 785-296-3565. Send one to Water Well Owner and retain one for your records.																																								