

WATER WELL PLUGGING RECORD

FORM WWC-5P

KSA 82a-1212

1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number																																				
County: Decatur	C 1/4 SW 1/4 NE 1/4	29	5	29 W																																				
Distance and direction from nearest town or city street address of well if located within city?																																								
2 WATER WELL OWNER: Everett Shuler																																								
RR#, St. Address, Box # 101 S Wolfe Ave																																								
City, State, ZIP Code : Oberlin, KS 67749																																								
Board of Agriculture, Division of Water Resources Application Number: 20070414																																								
3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF WELL 120 ft.																																						
N		WELL'S STATIC WATER LEVEL 95 ft.																																						
<table border="1" style="margin: auto; border-collapse: collapse;"> <tr> <td style="width: 50px; height: 50px; text-align: center;">NW</td> <td style="width: 50px; height: 50px; text-align: center;">NE</td> </tr> <tr> <td style="width: 50px; height: 50px; text-align: center;">SW</td> <td style="width: 50px; height: 50px; text-align: center;">SE</td> </tr> </table>		NW	NE	SW	SE	WELL WAS USED AS:																																		
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S		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:																																								
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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 92 ft. to 95 ft. From _____ ft. to _____ ft.																																								
What is the nearest source of possible contamination:																																								
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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) 5/29/08 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 554783 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>DS</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.																																								