

WATER WELL PLUGGING RECORD Form WWC-5P

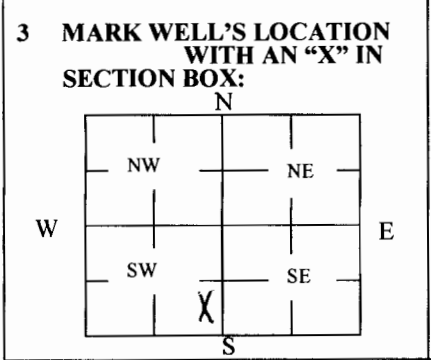
KSA 82a-1212

ID NO.

1 LOCATION OF WATER WELL: County: <u>Chowas</u>	Fraction <u>SW 1/4</u> 1/4 1/4	Section Number <u>32</u>	Township Number T <u>5</u> S	Range Number W <u>3</u> <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 <input checked="" type="checkbox"/> <u>1809 N 132nd</u> <u>Concordia, KS 66901</u>	Global Positioning Systems (GPS) information: Latitude: _____ (in decimal degrees) Longitude: _____ (in decimal degrees) Elevation: _____ Datum: <input type="checkbox"/> WGS84, <input type="checkbox"/> NAD83, <input type="checkbox"/> NAD27 Collection Method: _____
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2 WATER WELL OWNER: <u>Robert L. Shanks</u> RR#, St. Address, Box #: <u>PO Box 31</u> City, State ZIP Code: <u>Concordia, KS 66901</u>	<input type="checkbox"/> GPS unit (Make/Model: _____) <input type="checkbox"/> Digital Map/Photo, <input type="checkbox"/> Topographic Map, <input type="checkbox"/> Land Survey Est. Accuracy: <input type="checkbox"/> < 3 m, <input type="checkbox"/> 3-5 m, <input type="checkbox"/> 5-15 m, <input type="checkbox"/> > 15 m
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4 DEPTH OF WELL 218 ft.
WELL'S STATIC WATER LEVE 175 ft.
WELL WAS USED AS:

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

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

5 TYPE OF BLANK CASING USED:

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

Blank casing diameter 6 in. Was casing pulled? Yes No If yes, how much _____
 Casing height above or below land surface N/A in.

6 GROUT PLUG MATERIAL: Neat cement Cement grout Bentonite Other _____

Grout Plug Intervals: From _____ ft. to _____ ft., From _____ ft. to _____ ft., From _____ 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
<u>218</u>	<u>45+</u>	<u>Sand & Chlorine</u>			
<u>44</u>	<u>24</u>	<u>bentonite</u>			
<u>2</u>	<u>0</u>	<u>sand</u>			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 8/19/15 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. _____. This Water Well Record was completed on (mo/day/year) 7/20/17 under the business name of Hay Creek LLC by (signature)

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>.

Cloud

3W

32-5-3W

**NPS POLLUTION CONTROL FUNDS
 ABANDONED WATER WELL COST-SHARE PROGRAM
 (WELL PLUGGING WORKSHEET)**

WORKSHEET: (Use water quality bulletin to complete this worksheet, available through Cooperative Extension Service)

Name: ROBERT L SHANKS County: CLOUD Date: July 20, 2017

Type of Well: Drilled: Hand dug:

Diameter (Inside): 6 in Diameter (Outside): 8 in Depth to Water: 175 Total Depth: 218 ft

TOP SOIL: 3 ft

TOP SOIL NEEDED:

0.35 cu.ft/ft x 3 ft = 1.0 cu.ft

1.0 cu.ft x 1 cu.yd/27 cu.ft = 0.0 cu.yds

BENTONITE PLUG: 2 ft

BENTONITE NEEDED:

PLUG: 0.35 cu.ft/ft x 2 ft. = 0.7 cu.ft

GROUT SEAL RESTORATION: 0.0 cu.ft

0.7 cu.ft x 1 bag/0.7 cu.ft = 1.0 bags

SUBSOIL: 170 ft

SUBSOIL NEEDED:

0.20 cu.ft/ft x 170 ft = 33.4 cu.ft

33.4 cu.ft x 1 cu.yd/27 cu.ft = 1.2 cu.yds

SAND (to water level): 43 ft

SAND NEEDED:

0.20 cu.ft/ft x 43 ft = 8.4 cu.ft

8.4 cu.ft x 1 cu.yd/27 cu.ft = 0.3 cu.yds

CHLORINE NEEDED - Dry (70%):

0.14 oz/ft x 43 ft = 6.1 oz

6.1 oz x 1 lb/16 oz = 0.4 lb

SITE PREPARATION: REMOVE PUMP AND COLUMN PIPE AND DEBRIS. EXCAVATE AROUND DRILLED WELL CASING AND CUT CASING 3 FEET BELOW GROUND LEVEL. STOCKPILE FILL MATERIAL ON SITE. LEAVE IN TRUCK IF POSSIBLE. HANDDUG WELLS NEED TRACTOR WITH FRONT END LOAD OR LARGE PRY BARS TO CAVE IN ROCK LINING.