WATER WELL PLUGGING RECORD  Form WWC-5P  KSA 82a-1212  ID NO. AS-12

1 LOCATION OF WATER WELL:  Fraction  Section Number  Township Number  Range Number  
County: Rooks  SE ¼ SW¼ NW¼ SW¼ 10  T 7  S 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 □ Hwy 24 & Pine Street, Woodson  A6-082-40271

2 WATER WELL OWNER:  Patrick Lingg  
RR#, St. Address, Box #: P.O. Box 542  
City, State ZIP Code: Stockton, KS 67669

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

4 DEPTH OF WELL 56.8 ft.  
WELL'S STATIC WATER LEVEL NA ft.  
WELL WAS USED AS:  
□ Domestic  □ Public Water Supply  □ Dewatering  
□ Irrigation  □ Oil Field Water Supply  □ Monitoring  
□ Feedlot  □ Domestic (Lawn & Garden)  □ Injection Well  
□ Industrial  □ Air Conditioning  □ Other Air Sparging  
Was a chemical/bacteriological sample submitted to Department? Yes □ No □

5 TYPE OF BLANK CASING USED:  
□ Steel  □ RMP (SR)  □ Wrought  □ Other (Specify below)  
□ PVC □ ABS □ Asbestos-Cement  □ Fiberglass  □ Concrete Tile
Blank casing diameter 2 ___ in. Was casing pulled? Yes □ No □  
If yes, how much ~3 ft below ground surface
Casing height above or below land surface -36 ___ in.

6 GROUT PLUG MATERIAL:  
□ Neat cement  □ Cement grout □ Bentonite  □ Other ________
Grout Plug Intervals: From 3 ft. to 56.8 ft., From ________ ft. to ________ ft., From ________ ft. to ________ ft.
What is the nearest source of possible contamination:  
□ Septic tank  □ Seepage pit  □ Fuel storage  □ Other (specify below)  
□ Sewer lines  □ Pit privy  □ Fertilizer storage  
□ Watertight sewer lines  □ Sewage lagoon  □ Insecticide storage  
□ Lateral lines  □ Feedyard  □ Abandoned water well  
□ Cess pool  □ Livestock pens  □ Oil well/Gas well  
□ Direction from well? ________
How many feet? ________

FROM  TO  PLUGGING MATERIALS  FROM  TO  PLUGGING MATERIALS
3  56.8  Bentonite

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:  This water well was plugged under my jurisdiction and was completed on (mo/day/year) 03/11/24 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) 03/29/24, under the business name of Greenfield Contractors, Inc.  
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. 

KSA82a-1212  Revised 1/20/2015