

WATER WELL PLUGGING RECORD

FORM WWC-5P

KSA 82a-1212

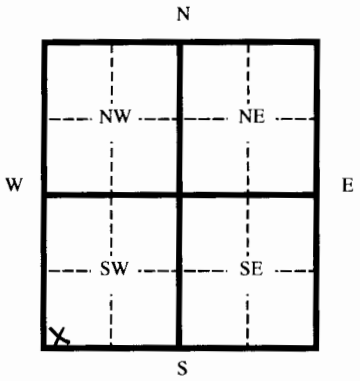
1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: <b>Sheridan</b>	<b>SW 1/4 SW 1/4 SW 1/4</b>	<b>25</b>	<b>7</b>	<b>30 W</b>

Distance and direction from nearest town or city street address of well if located within city?

**SW corner of Section 25—Intersection of Road 100W & W Road 40 N**

2 WATER WELL OWNER: <b>Earl Moss</b>	Board of Agriculture, Division of Water Resources Application Number:
RR#, St. Address, Box # <b>9985 W Rd 40 N</b>	
City, State, ZIP Code : <b>Selden, KS 67757</b>	

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



4 DEPTH OF WELL <b>240</b> ft.												
WELL'S STATIC WATER LEVEL <b>193</b> ft.												
WELL WAS USED AS:												
<table border="0"> <tr> <td><input checked="" type="checkbox"/> 1 Domestic</td> <td><input type="checkbox"/> 5 Public Water Supply</td> <td><input type="checkbox"/> 9 Dewatering</td> </tr> <tr> <td><input type="checkbox"/> 2 Irrigation</td> <td><input checked="" type="checkbox"/> 6 Oil Field Water Supply</td> <td><input type="checkbox"/> 10 Monitoring Well</td> </tr> <tr> <td><input type="checkbox"/> 3 Feedlot</td> <td><input type="checkbox"/> 7 Lawn and Garden (domestic)</td> <td><input type="checkbox"/> 11 Injection Well</td> </tr> <tr> <td><input type="checkbox"/> 4 Industrial</td> <td><input type="checkbox"/> 8</td> <td><input type="checkbox"/> 12 Other</td> </tr> </table>	<input checked="" type="checkbox"/> 1 Domestic	<input type="checkbox"/> 5 Public Water Supply	<input type="checkbox"/> 9 Dewatering	<input type="checkbox"/> 2 Irrigation	<input checked="" type="checkbox"/> 6 Oil Field Water Supply	<input type="checkbox"/> 10 Monitoring Well	<input type="checkbox"/> 3 Feedlot	<input type="checkbox"/> 7 Lawn and Garden (domestic)	<input type="checkbox"/> 11 Injection Well	<input type="checkbox"/> 4 Industrial	<input type="checkbox"/> 8	<input type="checkbox"/> 12 Other
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Was a chemical/bacteriological sample submitted to Department? Yes ___ No <input checked="" type="checkbox"/>												
If yes, mo/day/yr sample was submitted _____												
Water Well Disinfected: Yes <input checked="" type="checkbox"/> No _____												

5 TYPE OF BLANK CASING USED:

<input type="checkbox"/> 1 Steel	<input type="checkbox"/> 3 RMP (SR)	<input type="checkbox"/> 5 Wrought	<input type="checkbox"/> 7 Fiberglass	<input type="checkbox"/> 9 Other (specify below)
<input checked="" type="checkbox"/> 2 PVC	<input type="checkbox"/> 4 ABC	<input type="checkbox"/> 6 Asbestos-Cement	<input type="checkbox"/> 8 Concrete Tile	

Blank casing diameter 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  3 Bentonite  4 Other \_\_\_\_\_

Grout Plug Intervals From 3 ft. to 6 ft. From 190 ft. to 193 ft. From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

What is the nearest source of possible contamination:

<input type="checkbox"/> 1 Septic tank	<input type="checkbox"/> 6 Seepage pit	<input type="checkbox"/> 11 Fuel storage	<input type="checkbox"/> 16 Other (specify below)
<input type="checkbox"/> 2 Sewer lines	<input type="checkbox"/> 7 Pit privy	<input type="checkbox"/> 12 Fertilizer storage	
<input type="checkbox"/> 3 Watertight sewer lines	<input type="checkbox"/> 8 Sewage lagoon	<input type="checkbox"/> 13 Insecticide storage	
<input type="checkbox"/> 4 Lateral lines	<input type="checkbox"/> 9 Feedyard	<input type="checkbox"/> 14 Abandoned water well	
<input type="checkbox"/> 5 Cess Pool	<input type="checkbox"/> 10 Livestock pens	<input type="checkbox"/> 15 Oil well/ Gas well	

Direction from well? \_\_\_\_\_ How many feet? \_\_\_\_\_

FROM	TO	CODE	PLUGGING MATERIALS
0	3		Native soil
3	6		Bentonite
6	190		Clay
190	193		Bentonite
193	240		Chlorinated Sand

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/yr) 5-14-12 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 554 This Water Well Record was completed on (mo/day/yr) 5/22/12 under the business name of Woofer Pump & Well Inc. by (signature) *Jerry L. Woofer*

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.