

WATER WELL PLUGGING RECORD

Form WWC-5P

KSA 82a-1212

ID No.

1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: Thomas	SW 1/4 NE 1/4 NE 1/4	6	8	33 W

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

SW of Garfield Ave. & West Plum St.

(originally reported as MW-9 on WWC-5 form)

2 WATER WELL OWNER:	City of Colby	Board of Agriculture, Division of Water Resources
RR#, St. Address, Box #	585 N. Franklin	Application Number:
City, State, ZIP Code :	Colby, KS 67701	

3 MARK WELL'S LOCATON WITH AN "X" IN SECTION BOX:	4 DEPTH OF WELL 193.5 ft. Well originally completed to 192 ft. bgs																
<p style="text-align: center;">N</p> <table border="1"> <tr> <td style="text-align: center;">NW</td> <td style="text-align: center;">X</td> </tr> <tr> <td style="text-align: center;">SW</td> <td style="text-align: center;">SE</td> </tr> </table> <p style="text-align: center;">S</p>	NW	X	SW	SE	<p>WELL'S STATIC WATER LEVEL 120 ft.</p> <p>WELL WAS USED AS:</p> <table border="0"> <tr> <td>1 Domestic</td> <td>5 Public Water Supply</td> <td>9 Dewatering</td> </tr> <tr> <td>2 Irrigation</td> <td>6 Oil Field Water Supply</td> <td>10 Monitoring Well</td> </tr> <tr> <td>3 Feedlot</td> <td>7 Lawn and Garden (domestic)</td> <td>11 Injection Well</td> </tr> <tr> <td>4 Industrial</td> <td>8 Air Conditioning</td> <td>12 Other</td> </tr> </table> <p>Was a chemical/bacteriological sample submitted to Department? Yes ____ No X</p> <p>If yes, mo/day/yr sample was submitted _____</p> <p>Water Well Disinfected: Yes ____ No X</p>	1 Domestic	5 Public Water Supply	9 Dewatering	2 Irrigation	6 Oil Field Water Supply	10 Monitoring Well	3 Feedlot	7 Lawn and Garden (domestic)	11 Injection Well	4 Industrial	8 Air Conditioning	12 Other
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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 in.	Was casing pulled?	Yes ____ No X	If yes, how much	
Casing height above or below land surface	36 in.	Overdrilled to 3 feet below ground surface			

6 GROUT PLUG MATERIAL:	1 Neat cement	2 Cement grout	3 Bentonite	4 Other
Grout Plug Intervals	From 0.5 ft. to 193.5 ft.	From _____ ft. to _____ 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		
3 Watertight sewer lines	8 Sewage lagoon	13 Insecticide storage		
4 Lateral lines	9 Feedyard	14 Abandoned water well		
5 Cess Pool	10 Livestock pens	15 Oil well/ Gas well		
Direction from well? _____		How many feet? _____		

FROM	TO	CODE	PLUGGING MATERIALS
0	0.5		Soil
0.5	193.5		Neat Cement

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/yr) 9-6-05 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 531 This Water Well Record was completed on (mo/day/yr) 9-20-05 under the business name of Geotechnical Services, Inc.
by (signature) <i>Wanda Val</i>

INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment, Bureau of Water, 1000 S W Jackson St., Ste. 420, Topeka, Kansas 66620-0001. Telephone: 785-296-3565. Send one to Water Well Owner and retain one for your records.