

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	NW 1/4 NW 1/4 NW 1/4	6	8	33 W

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

NW corner of Mission Ridge Ave & West Cherry St.

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

3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4 DEPTH OF WELL	125.75	ft. Well originally completed to 125.8 ft. bgs
	WELL'S STATIC WATER LEVEL	122.09	ft.
	WELL WAS USED AS:		
	1 Domestic 2 Irrigation 3 Feedlot 4 Industrial	5 Public Water Supply 6 Oil Field Water Supply 7 Lawn and Garden (domestic) 8 Air Conditioning	9 Dewatering 10 Monitoring Well 11 Injection Well 12 Other
	Was a chemical/bacteriological sample submitted to Department? Yes _____ No X If yes, mo/day/yr sample was submitted _____ Water Well Disinfected: Yes _____ No X		

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 125.75	ft. From _____	ft. to _____

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	125.75		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>William J. J...</i>
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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.