

## WATER WELL PLUGGING RECORD Form WWC-5P

KSA 82a-1212

ID NO.

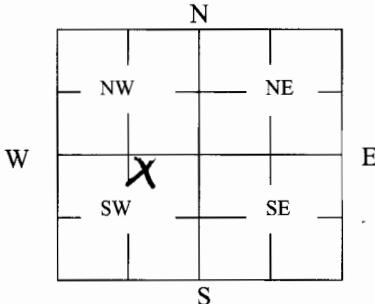
1 LOCATION OF WATER WELL: Fraction NW 1/4 NE 1/4 SW 1/4 Section Number 2 Township Number 8S Range Number 35 EW W  
 County: Thomas

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

204 4th Street, Levent, KS 67743

2 WATER WELL OWNER: Willard Miller Jr Global Positioning Systems (decimal degrees, min. of 4 digits)  
 RR#, St. Address, Box #: 2 Lee Circle Latitude: \_\_\_\_\_  
 City, State ZIP Code: Colby, KS 67701 Longitude: \_\_\_\_\_  
 Elevation: \_\_\_\_\_  
 Datum: \_\_\_\_\_  
 Data Collection Method: \_\_\_\_\_

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

4 DEPTH OF WELL 147 ft.WELL'S STATIC WATER LEVEL Dry ft

WELL WAS USED AS:

- |   |                            |                   |
|---|----------------------------|-------------------|
| <input checked="" type="radio"/> 1 Domestic | 5 Public Water Supply      | 9 Dewatering      |
| 2 Irrigation                                | 6 Oil Field Water Supply   | 10 Monitoring     |
| 3 Feedlot                                   | 7 Domestic (Lawn & Garden) | 11 Injection Well |
| 4 Industrial                                | 8 Air Conditioning         | 12 Other _____    |

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

## 5 TYPE OF BLANK CASING USED:

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

Blank casing diameter 6" in. Was casing pulled? Yes X No \_\_\_\_\_ If yes, how much 22'  
 Casing height above or below and surface 22 feet

6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout ☒ 3 Bentonite 4 Other \_\_\_\_\_Grout Plug Intervals: From 147 ft. to 120 ft., From 10 ft. to 7 ft., From \_\_\_\_\_ to \_\_\_\_\_ ft.

What is the nearest source of possible contamination:

- |                          |                   |                         |  |
|--------------------------|-------------------|-------------------------|--|
| 1 Septic tank            | 6 Seepage pit     | 11 Fuel Storage         | <input checked="" type="radio"/> 16 Other (specify below) <u>Fresh water line (capped)</u> |
| 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 | Direction from well? <u>E/NE</u>   |
| 5 Cess pool              | 10 Livestock pens | 15 Oil well/Gas well    | How many feet? <u>8'</u>   |

| FROM       | TO         | PLUGGING MATERIALS              | FROM | TO | PLUGGING MATERIALS |
|------------|------------|---------------------------------|------|----|--------------------|
| <u>147</u> | <u>120</u> | <u>Bentonite</u>                |      |    |                    |
| <u>120</u> | <u>10</u>  | <u>clay</u>                     |      |    |                    |
| <u>10</u>  | <u>7</u>   | <u>Bentonite</u>                |      |    |                    |
| <u>7</u>   | <u>0</u>   | <u>Compacted clay + topsoil</u> |      |    |                    |
|            |            |                                 |      |    |                    |
|            |            |                                 |      |    |                    |
|            |            |                                 |      |    |                    |

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 5-30-08 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 6623. This Water Well Record was completed on (mo/day/year) 5-23-08 under the business name of Brenn Pump & Supply by (signature) [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: 785/296-5522. Send one to Water Well Owner and retain one for your records. Visit us at <http://www.kdheks.gov/geo/waterwells>.