



INACTIVE WATER WELL REQUEST FORM WWC-6 KSA

In accordance with K.A.R. 28-30-7, Landowners may obtain the department's written approval to maintain wells in an inactive status rather than being plugged if the landowner can present evidence to the department as to the condition of the well and as to the landowner's intentions to use the well in the future. As evidence of intentions, the owner shall be responsible for properly maintaining the well in such a way that:

- The well and the annular space between the hole and the casing shall have no defects that will permit the entrance of surface water or vertical movement of subsurface water into the well;
The well is clearly marked and is not a safety hazard;
The top of the well is securely capped in a watertight manner and is adequately maintained in such a manner as to prevent easy entry by other than the landowner;
The area surrounding the well shall be protected from potential sources of contamination within a 50 foot radius;
If the pump, motor or both, have been removed for repair, replacement, etc., the well shall be maintained to prevent injury to the people and to prevent the entrance of any contaminants or other foreign materials;
The well shall not be used for disposal or injection of trash, garbage, sewage, wastewater or storm runoff; and
The well shall be easily accessible to routine maintenance periodic inspection.

INSTRUCTIONS: Please provide the department with the following information on your inactive well. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in all blanks, underline or circle the correct answers.

1. LOCATION OF WATER WELL: Fraction Section # Township # Range #
County: 1/4 1/4 1/4 T S R E W

*****WATER WELL OWNER:
RR#, St. Address, Box #: City, State, Zip Code:

2. WATER RIGHT FILE NO.: 4. DEPTH OF COMPLETED WELL: ft.

5. WELL'S STATIC WATER LEVEL: ft.

6. WELL PREVIOUSLY USED AS: 1. Domestic 2. Irrigation 3. Feedlot 4. Industrial 5. Public Water Supply 6. Oil Field Water Supply 7. Lawn and Garden Only 8. Air Conditioning 9. Dewatering 10. Observation Well 11. Injection Well 12. Other

7. TYPE OF BLANK CASING USED: 1. Steel 2. PVC 3. RMP (SR) 4. ABS 5. Wrought Iron 6. Asbestos-Cement 7. Fiberglass 8. Concrete Tile 9. Other

8. GROUT MATERIAL: 1. Neat Cement 2. Cement Grout 3. Bentonite 4 Other
Grout Interval: From ft. To ft.

9. NEAREST SOURCE OF POSSIBLE CONTAMINATION: 1. Septic Tank 2. Sewer Lines 3. Watertight Sewer Lines 4. Lateral Lines 5. Cess Pool 6. Seepage Pit 7. Pit Privy 8. Sewage Lagoon 9. Feedyard 10. Livestock Pens 11. Fuel Storage 12. Fertilizer Storage 13. Insecticide Storage 14. Abandoned Water Well 15. Oil Well/Gas Well 16. Other (specify below)

10. WELL ORIGINALLY CONSTRUCTED BY: (Driller's Name):
RR#, St. Address, Box #: City, State, Zip Code:

11. DATE WELL PLACED ON INACTIVE STATUS:

12. ESTIMATED REACTIVATION DATE:

I certify this water well currently in compliance with all applicable requirements for inactive wells and agree to maintain the well in accordance with K.A.R. 28-30-7f until such time well is either reactivated or plugged.

Signature of Well Owner