

**WATER WELL PLUGGING RECORD Form WWC-5P KSA 82a-1212 ID NO.**

\_\_\_\_\_

**1 LOCATION OF WATER WELL:** Fraction 1/4 NE 1/4 NE 1/4 SE 1/4 Section Number 34 Township Number T 10 S Range Number 25 NE  W  
 County: Wyandotte

Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here  Magellan KC Terminal  
401 E. Donovan Rd.  
Kansas City, KS 62215

**Global Positioning Systems (GPS) information:**  
 Latitude: 39.138824 (in decimal degrees)  
 Longitude: -94.604619 (in decimal degrees)  
 Elevation: \_\_\_\_\_  
 Horizontal Datum:  WGS84,  NAD83,  NAD27  
 Collection Method: \_\_\_\_\_

**2 WATER WELL OWNER:** Magellan Midstream Partners,  
 RR#, St. Address, Box #: 401 E. Donovan Rd.  
 City, State ZIP Code: Kansas City, KS 62215

GPS unit (Make/Model: \_\_\_\_\_)  
 Digital Map/Photo,  Topographic Map,  Land Survey  
 Est. Accuracy:  < 3 m,  3-5 m,  5-15 m,  > 15 m

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

N	
NW	NE
SW	SE
S	

W E

X

**4 DEPTH OF WELL** 27 ft.

WELL'S STATIC WATER LEVEL \_\_\_\_\_ ft well # GM-65

WELL WAS USED AS:

<input type="checkbox"/> Domestic	<input type="checkbox"/> Public Water Supply	<input type="checkbox"/> Dewatering
<input type="checkbox"/> Irrigation	<input type="checkbox"/> Oil Field Water Supply	<input checked="" type="checkbox"/> Monitoring
<input type="checkbox"/> Feedlot	<input type="checkbox"/> Domestic (Lawn & Garden)	<input type="checkbox"/> Injection Well
<input type="checkbox"/> Industrial	<input type="checkbox"/> Air Conditioning	<input type="checkbox"/> Other _____

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

**5 TYPE OF BLANK CASING USED:**

<input type="checkbox"/> Steel	<input type="checkbox"/> RMP (SR)	<input type="checkbox"/> Wrought	<input type="checkbox"/> Fiberglass	<input type="checkbox"/> Other (Specify below)
<input checked="" type="checkbox"/> PVC	<input type="checkbox"/> ABS	<input type="checkbox"/> Asbestos-Cement	<input type="checkbox"/> Concrete Tile	_____

Blank casing diameter 2 in. Was casing pulled? Yes  No  If yes, how much All  
 Casing height above or below land surface 0 in.

**6 GROUT PLUG MATERIAL:**  Neat cement  Cement grout  Bentonite  Other High Solids

Grout Plug Intervals: From \_\_\_\_\_ ft. to \_\_\_\_\_ ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

What is the nearest source of possible contamination:

<input type="checkbox"/> Septic tank	<input type="checkbox"/> Seepage pit	<input type="checkbox"/> Fuel storage	<input checked="" type="checkbox"/> Other (specify below)
<input type="checkbox"/> Sewer lines	<input type="checkbox"/> Pit privy	<input type="checkbox"/> Fertilizer storage	<u>Upgradient Source Plumes</u>
<input type="checkbox"/> Watertight sewer lines	<input type="checkbox"/> Sewage lagoon	<input type="checkbox"/> Insecticide storage	
<input type="checkbox"/> Lateral lines	<input type="checkbox"/> Feedyard	<input type="checkbox"/> Abandoned water well	Direction from well? <u>Unknown</u>
<input type="checkbox"/> Cess pool	<input type="checkbox"/> Livestock pens	<input type="checkbox"/> Oil well/Gas well	How many feet? <u>Unknown</u>

FROM	TO	PLUGGING MATERIALS	FROM	TO	PLUGGING MATERIALS

**7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:** This water well was plugged under my jurisdiction and was completed on (mo/day/year) 8/19/2016 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 903. This Water Well Record was completed on (mo/day/year) 10/25/2016 under the business name of Roberts Environmental Drilling, Inc. by (signature) [Signature]