

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

1 LOCATION OF WATER WELL: Fraction 1/4 NE 1/4 NW 1/4 SW 1/4 Section Number 35 Township Number T 10 S Range Number 25 E W
 County: Wyandotte

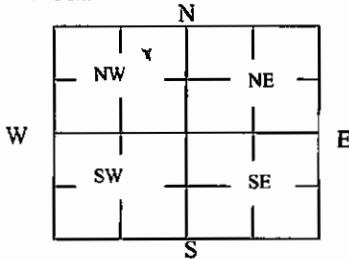
Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here Magellan KC Terminal
 401 E. Donovan Rd.
 Kansas City, KS 62215

Global Positioning Systems (GPS) information:
 Latitude: 39.138659 (in decimal degrees)
 Longitude: -94.100358 (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:



4 DEPTH OF WELL 50 ft.

WELL'S STATIC WATER LEVEL _____ ft

WELL WAS USED AS:

- Domestic
- Irrigation
- Feedlot
- Industrial
- Public Water Supply
- Oil Field Water Supply
- Domestic (Lawn & Garden)
- Air Conditioning
- Dewatering
- Monitoring
- Injection Well
- Other _____

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

5 TYPE OF BLANK CASING USED:

- Steel
- PVC
- RMP (SR)
- ABS
- Wrought
- Asbestos-Cement
- Fiberglass
- Concrete Tile
- Other (Specify below) _____

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:

- Septic tank
- Sewer lines
- Watertight sewer lines
- Lateral lines
- Cess pool
- Seepage pit
- Pit privy
- Sewage lagoon
- Feedyard
- Livestock pens
- Fuel storage
- Fertilizer storage
- Insecticide storage
- Abandoned water well
- Oil well/Gas well
- Other (specify below) Upgradient Source Plumes

Direction from well? Unknown
 How many feet? Unknown

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) 9/19/16 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) 10/25/16 under the business name of Roberts Environmental Drilling, Inc. by (signature) _____

Send one white copy to Kansas Department of Health & Environment, Geology Section, 1000 SW Jackson Street, Ste. 420, Topeka, KS 66612-1367. Send one copy to WATER WELL OWNER and retain one for your records.
 Visit us at <http://www.kdheks.gov/waterwell/index.html> Telephone 785-296-5524.