

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

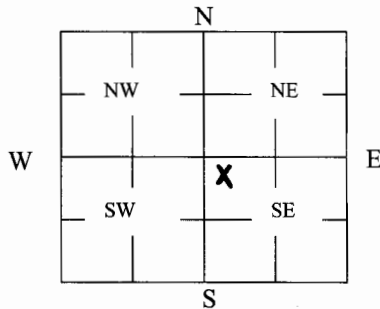
1 LOCATION OF WATER WELL:
 County: Shawnee Fraction NW 1/4 SE 1/4 SE 1/4 Section Number 18 Township Number 11 Range Number 16 W

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

635 NW Hwy 24 Topeka, KS 66608

2 WATER WELL OWNER:
 RR#, St. Address, Box #: BP Amoco 635 NW Hwy 24
 City, State ZIP Code: Topeka, KS 66608
 Global Positioning Systems (decimal degrees, min. of 4 digits)
 Latitude: _____
 Longitude: _____
 Elevation: _____
 Datum: _____
 Data Collection Method: _____

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



4 DEPTH OF WELL 32.68 ft.

WELL'S STATIC WATER LEVEL 28.19 ft

WELL WAS USED AS:

- | | | |
|--------------|----------------------------|---|
| 1 Domestic | 5 Public Water Supply | 9 Dewatering |
| 2 Irrigation | 6 Oil Field Water Supply | <input checked="" type="checkbox"/> 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 _____

5 TYPE OF BLANK CASING USED:

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

Blank casing diameter 2 in. Was casing pulled? Yes No _____ If yes, how much 20'
 Casing height above or below land surface _____ in.

6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other _____

Grout Plug Intervals: From 0 ft. to 20 ft., From _____ ft. to _____ ft., From _____ to _____ ft.

What is the nearest source of possible contamination:

- | | | | |
|--------------------------|-------------------|-------------------------|--|
| 1 Septic tank | 6 Seepage pit | 11 Fuel Storage | <input checked="" type="checkbox"/> 16 Other (specify below) |
| 2 Sewer lines | 7 Pit privy | 12 Fertilizer storage | <u>USTS</u> |
| 3 Watertight sewer lines | 8 Sewage lagoon | 13 Insecticide storage | |
| 4 Lateral lines | 9 Feedyard | 14 Abandoned water well | Direction from well? <u>N</u> |
| 5 Cess pool | 10 Livestock pens | 15 Oil well/Gas well | How many feet? <u>75'</u> |

FROM	TO	PLUGGING MATERIALS	FROM	TO	PLUGGING MATERIALS
<u>0</u>	<u>20</u>	<u>Bentonite</u>			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 11/20/06 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 704. This Water Well Record was completed on (mo/day/year) 11/2/07 under the business name of MAXS by (signature) David Newell

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>.