

WATER WELL PLUGGING RECORD Form WWC-5P

KSA 82a-1212 ID NO. mw-7

1 LOCATION OF WATER WELL: County: <u>Shawnee</u>	Fraction <u>NW 1/4 SE 1/4 SW 1/4 SW 1/4</u>	Section Number <u>10</u>	Township Number <u>T 12 S</u>	Range Number <u>15</u> <input checked="" type="checkbox"/> E <input type="checkbox"/> W
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Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here <input type="checkbox"/> <u>2820 Fairlawn; Topeka, KS</u>	Global Positioning Systems (GPS) information: Latitude: <u>39.015 820</u> (in decimal degrees) Longitude: <u>-95.742 786</u> (in decimal degrees) Elevation: _____ Datum: <input type="checkbox"/> WGS84, <input type="checkbox"/> NAD83, <input type="checkbox"/> NAD27 Collection Method: _____
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2 WATER WELL OWNER: TPI Petroleum (ELR LLC)
 RR#, St. Address, Box #: 5590 Havana St. Bldg B
 City, State ZIP Code: Denver CO 80239

GPS unit (Make/Model: etrek)
 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		
W	NW	NE
	SW	SE
	X	
S		

4 DEPTH OF WELL 15 ft.
WELL'S STATIC WATER LEVEL 9.29 ft.
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 checked="" 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 -6 in.

6 GROUT PLUG MATERIAL: Neat cement Cement grout Bentonite Other _____

Grout Plug Intervals: From 3 ft. to 15 ft., From - ft. to - ft., From - to - ft.

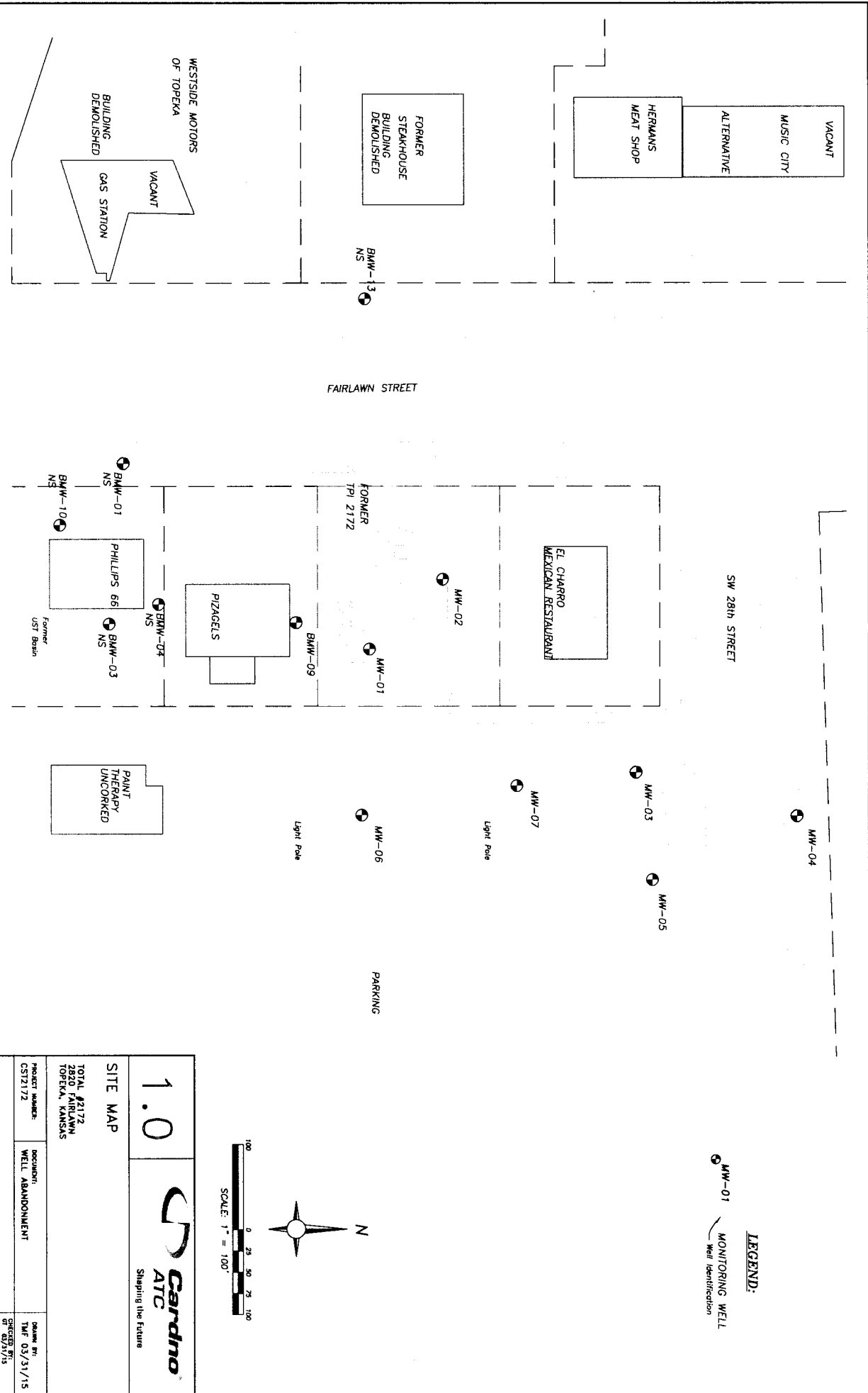
What is the nearest source of possible contamination:

<input type="checkbox"/> Septic tank	<input type="checkbox"/> Seepage pit	<input checked="" type="checkbox"/> Fuel Storage	<input type="checkbox"/> Other (specify below) _____
<input type="checkbox"/> Sewer lines	<input type="checkbox"/> Pit privy	<input type="checkbox"/> Fertilizer storage	
<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>South</u>
<input type="checkbox"/> Cess pool	<input type="checkbox"/> Livestock pens	<input type="checkbox"/> Oil well/Gas well	How many feet? <u>150</u>

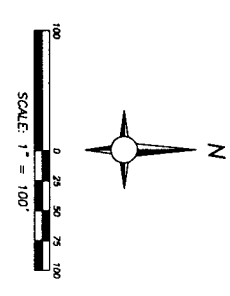
FROM	TO	PLUGGING MATERIALS	FROM	TO	PLUGGING MATERIALS
<u>0</u>	<u>3</u>	<u>Concrete</u>			
<u>3</u>	<u>15</u>	<u>Bentonite</u>			


7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 04062015 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 710. This Water Well Record was completed on (mo/day/year) 04072015 under the business name of Below Ground Surface, Inc. 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 one copy to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Ste. 420, Topeka, Kansas 66612-1367. Telephone: 785/296-5524. Send one to Water Well Owner and retain one for your records. Visit us at <http://www.kdheks.gov/waterwell/index.html>.



LEGEND:
 MW-01 MONITORING WELL
 Well Identification



<h1>1.0</h1>		 Cardno ATC Shaping the Future
SITE MAP TOTAL #2172 2820 FAIRLAWN TOPEKA, KANSAS		
PROJECT NUMBER: CS12172	DOCUMENT: WELL ABANDONMENT	DATE OF TWF 03/31/15 SHEET NO. OF 03/31/15