

mw 9

0041737

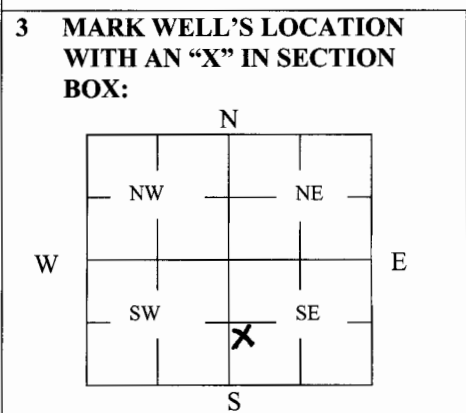
WATER WELL PLUGGING RECORD Form WWC-5P KSA 82a-1212 ID NO.

1 LOCATION OF WATER WELL: County: Shawnee Fraction NW 1/4 SW 1/4 SE 1/4 Section Number 6 Township Number 12S Range Number 16

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

123 SE 20th Topeka, KS 66612

2 WATER WELL OWNER: Robert Florence Contractor, Inc. RR#, St. Address, Box #: 1934 S. Kansas Ave. City, State ZIP Code: Topeka, KS 66612 Global Positioning Systems (decimal degrees, min. of 4 digits) Latitude: 1072.98 Longitude: 2231.48 Elevation: 899.37 Datum: Data Collection Method:



3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX: 4 DEPTH OF WELL 25.11 ft. WELL'S STATIC WATER LEVEL 18.71 ft. WELL WAS USED AS: 1 Domestic 2 Irrigation 3 Feedlot 4 Industrial 5 Public Water Supply 6 Oil Field Water Supply 7 Domestic (Lawn & Garden) 8 Air Conditioning 9 Dewatering 10 Monitoring 11 Injection Well 12 Other. Was a chemical/bacteriological sample submitted to Department? Yes No X

5 TYPE OF BLANK CASING USED: 1 Steel 2 PVC 3 RMP (SR) 4 ABS 5 Wrought 6 Asbestos-Cement 7 Fiberglass 8 Concrete Tile 9 Other (Specify below). Blank casing diameter 2 in. Was casing pulled? Yes X No. Casing height above or below land surface 40 in. If yes, how much 3'

6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other. Grout Plug Intervals: From 25.11 ft. to 20.5 ft., From ft. to ft., From ft. to ft.

What is the 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) MATERIAL STORAGE YARD. Direction from well? S How many feet? 5+

Table with 6 columns: FROM, TO, PLUGGING MATERIALS, FROM, TO, PLUGGING MATERIALS. Row 1: 25.11, .5, Bentonite chips. Row 2: .5, 0, Gravel.

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 7/10/09 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. NA. This Water Well Record was completed on (mo/day/year) 7/17/09 under the business name of Tank Management Services 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 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.