ID NO WATER WELL PLUGGING RECORD Form WWC-5P KSA 82a-1212 LOCATION OF WATER WELL: Fraction Section Number Township Number Range Number 14 **16S** 8 Morris SE 1/4 NW 1/4 County: (E)W Distance and direction from nearest town or city street address of well if located within city? 401 W. Main Street, Council Grove, Kansas 2 WATER WELL OWNER: Judy Casey RR #, St. Address, Box #: 2900 W. 74th St. Board of Agriculture, Division of Water Resources City, State, ZIP Code : Prairie Village, KS 66208 Application Number: MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX: WELL'S STATIC WATER LEVEL ..... ft. WELL WAS USED AS: 1 Domestic 5 Public Water Supply 9 Dewatering NW NE 10 Monitoring Well 11 Injection Well 6 Oil Field Water Supply 2 Irrigation Х 3 Feedlot 7 Domestic (Lawn & Garden) W 12 Other ..... 4 Industrial 8 Air Conditioning SW SE If yes, mo/day/yr sample was submitted ...... Water Well Disinfected: Yes ...... No ....X TYPE OF BLANK CASING USED: 3 RMP (SR) 5 Wrought 1 Steel 7 Fiberglass 9 Other (Specify below) (2)PVC 4 ABS 6 Asbestos-Cement 8 Concrete Tile ...... If yes, how much ~ 5 feet cut off Blank casing diameter ...... in. Was casing pulled? Yes ..... Casing height above or below land surface ...... in. below grade (4)Other Topsoil/grass GROUT PLUG MATERIAL: (3)Bentonite Neat cement 2 Cement grout 6 Grout Plug Intervals: What is the nearest source of possible contamination: 1 Septic tank 11 Fuel storage (16) Other (specify below) 6 Seepage pit Former gas station 2 Sewer lines 7 Pit privy 12 Fertilizer storage 8 Sewage lagoon 13 Insecticide storage 3 Watertight sewer lines 4 Lateral lines 9 Feedyard 14 Abandoned water well 5 Cess pool 10 Livestock pens 15 Oil well/Gas well Direction from well? ..... How many feet? ..... **FROM** TO PLUGGING MATERIALS 15 Bentonite 3 3 0 Topsoil/grass CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) \_\_\_\_\_\_\_\_ and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. \_\_\_\_\_\_\_ This Water Well Record was completed on (mo/day/year) by (signature) under the susiness name of Aquaterra Environmental Solutions, Inc.

INSTRUCTIONS: Use typewriter or ball point 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.