										MW-4
ΑT	ER WELL	_ PLUGGIN	G RECORD	Form WWC-5P	KSA 8	32a-1212	ID NO.			
С	ounty:		yon		½ NW	1/4	ion Number		hip Number 198	Range Numbe
		nd direction n St. – Emp		own or city street ac	daress of v	well if locat	ea witnin city	y?		
V	WATER WELL OWNER: Sunoco, Inc.					Global Positioning System (decimal degrees, min. of 4 digits) Latitude:				
RR#, St. Address, Box #: 100 Green St. City, State, ZIP Code: Marcus Hook, PA 19061					Longitude: Elevation: Datum: Data Collection Method:					
										N
	WELL'S ST	WELL'S STATIC WATER LEVEL 22.50 ft								
WELL WAS USED AS:						ıs.				
		_x,	NE							
					1 Domestic 5 Public Water Supply 9 Dewatering					
₩ - 					2 Irrigation 6 Oil Field Water Supply 10 Monitoring 3 Feedlot 7 Domestic (Lawn & Garden) 11 Injection Well					
				4 Industrial 8 Air Conditioning 12 Other					vveii	
SW SE					s a chemical/bacteriological sample submitted to Department? Yes No					
S										
	TYPE OF BLANK CASING USED: 1 Steel 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (Specify below)									
1 Steel 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (Specify below) 2 PVC 4 ABS 6 Asbestos-Cement 8 Concrete Tile										
	Blank casing diameter in. Was casing pulled? Yes _X No If yes, how much _All									
_(Casing hei	ight above o	r below land		ft.					
C	SROUT P	LUG MATE	RIAL: 1	Neat cement 2	Cement g	grout	3 Bentonite		4 Other	···
C	Frout Plug	Intervals:	From 1	ft. to 39.70	ft., Fr	om	ft. to	ft.,	From	to
What is the nearest source of possible contamination:										
1 Septic tank 6 Seepage pit 11 Fuel Storage 16 Other (specify below)										
2 Sewer lines 7 Pit privy 12 Fertilizer storage										
3 Watertight sewer lines 8 Sewage lagoon 13 Insecticide storage 4 Lateral lines 9 Feedyard 14 Abandoned water							ell Directi	on from w	/ell?	
5 Cess pool 10 Livestock pens 15 Oil well/Gas well How many feet?										
_	FROM	TO	PLUG	GING MATERIALS		FROM	ТО	P	LUGGING MA	ATERIALS
-	0	1	1 200	Native Soil		TION	- 10		<u> </u>	TETTALO
1 39.70 Bentonite Chips										
L	-									
H										
_	ONTE	TODIO OF	LANDOMATIC	NO CERTIFICATIO	M. This		an alice and		افعالت ما العالم	m.d
C		(mo/day/ye		R'S CERTIFICATIO 6/14/10 and						nd was lief. Kansas Wa

INSTRUCTIONS: Please fill in blanks 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/waterwell.