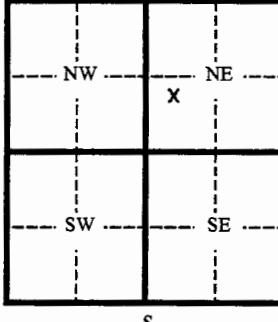


WATER WELL PLUGGING RECORD

Form WWC-5P

KSA 82a-1212

ID No. 00350637

1 LOCATION OF WATER WELL:		Fraction County: Butler NW 1/4 SW 1/4 NE 1/4	Section Number 35	Township Number 25	Range Number 05E																																																
Distance and direction from nearest town or city street address of well if located within city? 1400 N Main Street																																																					
2 WATER WELL OWNER:		Mark McCabe 2849 West 4 th St. El Dorado, KS 67042		Board of Agriculture, Division of Water Resources Application Number:																																																	
3 MARK WELL'S LOCATON WITH AN "X" IN SECTION BOX:		4 DEPTH OF WELL 20.31	ft. Originally drilled to 20.5 feet bgs																																																		
		WELL'S STATIC WATER LEVEL 11.45		ft.																																																	
WELL WAS USED AS:																																																					
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Was a chemical/bacteriological sample submitted to Department? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> X																																																					
If yes, mo/day/yr sample was submitted																																																					
Water Well Disinfected: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> X																																																					
5 TYPE OF BLANK CASING USED:																																																					
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Blank casing diameter <u>2</u> in. Was casing pulled? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> If yes, how much <u>20.5</u>																																																					
Casing height above or below land surface in. Overdrilled to 21 feet below ground surface																																																					
6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other																																																					
Grout Plug Intervals From <u>2</u> ft. to <u>21</u> ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.																																																					
What is the nearest source of possible contamination:																																																					
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Direction from well? _____ How many feet? _____																																																					
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7	CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/yr) <u>9-9-05</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>531</u> This Water Well Record was completed on (mo/day/yr) <u>9-19-05</u> under the business name of <u>Geotechnical Services, Inc.</u> by (signature) <u>Alison M. Ver</u>					
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INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment, Bureau of Water, 1000 S W Jackson St., Ste. 420, Topeka, Kansas 66620-0001. Telephone: 785-296-3565. Send one to Water Well Owner and retain one for your records.