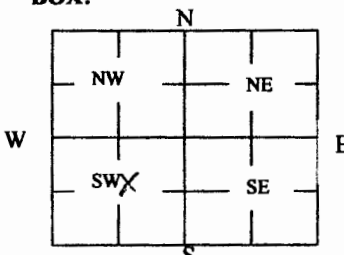


WATER WELL PLUGGING RECORD Form WWC-5P KSA 82a-1212 ID NO.

| | | | | |
|---|--|--|----------------------------------|---|
| 1 LOCATION OF WATER WELL: County: Sedgwick | Fraction SW 1/4 SW 1/4 NE 1/4 SW 1/4 | Section Number 33 | Township Number T 26 S | Range Number 1 <input checked="" type="checkbox"/> E <input type="checkbox"/> W |
| 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"/> Lot 1 Block A Flint hills Materials Addition | | Global Positioning Systems (GPS) information: Latitude: 37.737637 (in decimal degrees) Longitude: -97.332993 (in decimal degrees) Elevation: _____ Horizontal Datum: <input type="checkbox"/> WGS84, <input type="checkbox"/> NAD83, <input type="checkbox"/> NAD27 Collection Method: _____ | | |

| | |
|---|--|
| 2 WATER WELL OWNER: Vista Grande, LLC RR#, St. Address, Box #: 13011 Meadow Lane City, State ZIP Code: Leawood, Ks. 66206 | <input checked="" type="checkbox"/> GPS unit (Make/Model: _____) <input checked="" type="checkbox"/> Digital Map/Photo, <input type="checkbox"/> Topographic Map, <input type="checkbox"/> Land Survey Est. Accuracy: <input type="checkbox"/> < 3 m, <input type="checkbox"/> 3-5 m, <input type="checkbox"/> 5-15 m, <input type="checkbox"/> > 15 m |
|---|--|

| | | | | | | | | | | | | | |
|---|---|--|--|-------------------------------------|-------------------------------------|---|--|----------------------------------|---|---|-------------------------------------|---|--------------------------------------|
| 3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:  | 4 DEPTH OF WELL <u>40</u> ft. WELL'S STATIC WATER LEVEL <u>NA</u> ft. WELL WAS USED AS: <table style="width:100%;"> <tr> <td><input type="checkbox"/> Domestic</td> <td><input type="checkbox"/> Public Water Supply</td> <td><input type="checkbox"/> Dewatering</td> </tr> <tr> <td><input type="checkbox"/> Irrigation</td> <td><input type="checkbox"/> Oil Field Water Supply</td> <td><input checked="" type="checkbox"/> Monitoring</td> </tr> <tr> <td><input type="checkbox"/> Feedlot</td> <td><input type="checkbox"/> Domestic (Lawn & Garden)</td> <td><input type="checkbox"/> Injection Well</td> </tr> <tr> <td><input type="checkbox"/> Industrial</td> <td><input type="checkbox"/> Air Conditioning</td> <td><input type="checkbox"/> Other _____</td> </tr> </table> Was a chemical/bacteriological sample submitted to Department? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> | <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 _____ |
| <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 _____ | | | | | | | | | | | |

5 TYPE OF BLANK CASING USED:

Steel RMP (SR) Wrought Fiberglass Other (Specify below) _____
 PVC ABS Asbestos-Cement Concrete Tile

Blank casing diameter 2 in. Was casing pulled? Yes No If yes, how much 40 feet
 Casing height above or below land surface 0 in.

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

Grout Plug Intervals: From 0 ft. to 40 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.

What is the nearest source of possible contamination:

| | | | |
|---|---|---|--|
| <input type="checkbox"/> Septic tank | <input type="checkbox"/> Seepage pit | <input 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? _____ |
| <input type="checkbox"/> Cess pool | <input type="checkbox"/> Livestock pens | <input type="checkbox"/> Oil well/Gas well | How many feet? _____ |

| FROM | TO | PLUGGING MATERIALS | FROM | TO | PLUGGING MATERIALS |
|------|----|--------------------|------|----|--------------------|
| 0 | 40 | Bentonite | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 4/8/16 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 604. This Water Well Record was completed on (mo/day/year) 9/4/16 under the business name of Environmental Priority Service, Inc. by (signature) [Signature]