

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

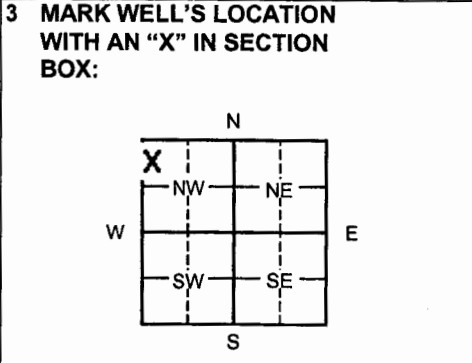
NA

1 LOCATION OF WATER WELL: Fraction NW ¼ NW ¼ NW ¼ Section Number 21 Township Number 27S Range Number 18 E
 County: **Neosho**

Distance and direction from nearest town or city street address of well if located within city?
720 N. Santa Fe, Chanute

2 WATER WELL OWNER: Chandler Oil Company c/o KDHE
 RR#, St. Address, Box #: **1000 SW Jackson St., Ste. 410**
 City, State, ZIP Code: **Topeka, KS 66612**

Global Positioning System (decimal degrees, min. of 4 digits)
 Latitude: _____
 Longitude: _____
 Elevation: _____
 Datum: _____
 Data Collection Method: _____



4 DEPTH OF WELL 9.50 ft.
WELL'S STATIC WATER LEVEL DRY ft.
WELL WAS USED AS:

1 Domestic	5 Public Water Supply	9 Dewatering
2 Irrigation	6 Oil Field Water Supply	10 <u>Monitoring</u>
3 Feedlot	7 Domestic (Lawn & Garden)	11 Injection Well
4 Industrial	8 Air Conditioning	12 Other _____

Was a chemical/bacteriological sample submitted to Department? Yes ___ No X

5 TYPE OF BLANK CASING USED:

1 <u>Steel</u>	3 RMP (SR)	5 Wrought	7 Fiberglass	9 Other (Specify below)
2 <u>PVC</u>	4 ABS	6 Asbestos-Cement	8 Concrete Tile	

Blank casing diameter 4 in. Was casing pulled? Yes ___ No ___ If yes, how much _____
 Casing height above or below land surface _____ in. **Overdrilled to 9.5 ft. bgs**

6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other Soil

Grout Plug Intervals: From 9.5 ft. to 1 ft., From 1 ft. to 0 ft., From _____ to _____ ft.

What is the nearest source of possible contamination:

1 Septic tank	6 Seepage pit	11 <u>Fuel Storage</u>	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 well	Direction from well? West
5 Cess pool	10 Livestock pens	15 Oil well/Gas well	How many feet? 200

FROM	TO	PLUGGING MATERIALS	FROM	TO	PLUGGING MATERIALS
0	1	Native Soil			
1	9.5	Bentonite			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 01/11/07 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 531. This Water Well Record was completed on (mo/day/year) 01/24/07 under the business name of Geotechnical Services, Inc. by (signature) [Signature]

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>.