

SWP-4A

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

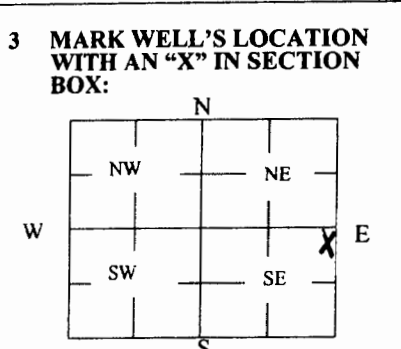
1 LOCATION OF WATER WELL: County: <u>Neosho</u>	Fraction: <u>NE 1/4 SE 1/4 NE 1/4 SE 1/4</u>	Section Number: <u>17</u>	Township Number: <u>T 27 S</u>	Range Number: <u>18</u> <input checked="" type="checkbox"/> E <input type="checkbox"/> W
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Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here Corner of W. Hickory St. and N. Santa Fe Ave. Chanute KS

Global Positioning Systems (GPS) information:
 Latitude: 37.693667 (in decimal degrees)
 Longitude: -95.45333 (in decimal degrees)
 Elevation: _____
 Horizontal Datum: WGS84, NAD83, NAD27
 Collection Method: _____

2 WATER WELL OWNER: MFA Oil Co.
 RR#, St. Address, Box #: PO Box 519
 City, State ZIP Code: Columbia MO 65205

GPS unit (Make/Model: Garmin eTrex)
 Digital Map/Photo, Topographic Map, Land Survey
 Est. Accuracy: <3 m, 3-5 m, 5-15 m, >15 m



4 DEPTH OF WELL 20 ft.
 WELL'S STATIC WATER LEVEL _____ ft.
 WELL WAS USED AS:

<input type="checkbox"/> Domestic	<input type="checkbox"/> Public Water Supply	<input checked="" type="checkbox"/> Dewatering
<input type="checkbox"/> Irrigation	<input type="checkbox"/> Oil Field Water Supply	<input 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 _____

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

5 TYPE OF BLANK CASING USED:

<input checked="" type="checkbox"/> Steel	<input type="checkbox"/> RMP (SR)	<input type="checkbox"/> Wrought	<input type="checkbox"/> Fiberglass	<input type="checkbox"/> Other (Specify below) _____
<input type="checkbox"/> PVC	<input type="checkbox"/> ABS	<input type="checkbox"/> Asbestos-Cement	<input type="checkbox"/> Concrete Tile	

Blank casing diameter 0.5 in. Was casing pulled? Yes No If yes, how much all
 Casing height above or below land surface -6 in.

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

Grout Plug Intervals: From 3 ft. to 20 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 checked="" type="checkbox"/> Other (specify below) <u>former fuel storage</u>
<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? <u>SW</u>
<input type="checkbox"/> Cess pool	<input type="checkbox"/> Livestock pens	<input type="checkbox"/> Oil well/Gas well	How many feet? <u>~150'</u>

FROM	TO	PLUGGING MATERIALS	FROM	TO	PLUGGING MATERIALS
<u>0</u>	<u>3</u>	<u>Top soil</u>			
<u>3</u>	<u>20</u>	<u>Bentonite</u>			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 5-3-16 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 710. This Water Well Record was completed on (mo/day/year) 5/6/16 under the business name of Below Ground Surface, Inc. by (signature) [Signature]

Send one white copy to Kansas Department of Health & Environment, Geology Section, 1000 SW Jackson Street, Ste. 420, Topeka, KS 66612-1367. Send one copy to WATER WELL OWNER and retain one for your records.
 Visit us at <http://www.kdheks.gov/waterwell/index.html> Telephone 785-296-5524.