

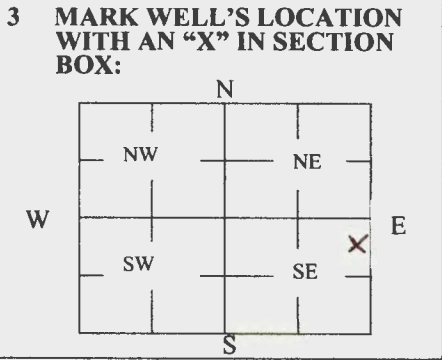
1 LOCATION OF WATER WELL: County: Butler	Fraction SE ¼ NE ¼ NE ¼ SE ¼	Section Number 8	Township Number T 27 S	Range Number 3 <input checked="" type="checkbox"/> E <input type="checkbox"/> W
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Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here 1607 Gwenda Ct., Andover, Ks.

Global Positioning Systems (GPS) information:
 Latitude: 37.7140305 (in decimal degrees)
 Longitude: -97.1180351 (in decimal degrees)
 Elevation: NA
 Horizontal Datum: WGS84, NAD83, NAD27
 Collection Method:

2 WATER WELL OWNER: NuStar Pipeline Operating
 RR#, St. Address, Box #: 7340 W. 21st St.
 City, State ZIP Code: Wichita, Ks. 67205

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



4 DEPTH OF WELL 25.1 ft.
 WELL'S STATIC WATER LEVEL Dry ft.
 WELL WAS USED AS:

<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 _____

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

5 TYPE OF BLANK CASING USED:

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

Blank casing diameter 2 in. Was casing pulled? Yes No If yes, how much 3 ft.
 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 25.1 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) _____
<input type="checkbox"/> Sewer lines	<input type="checkbox"/> Pit privy	<input type="checkbox"/> Fertilizer storage	<input type="checkbox"/> pipeline
<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>SE</u>
<input type="checkbox"/> Cess pool	<input type="checkbox"/> Livestock pens	<input type="checkbox"/> Oil well/Gas well	How many feet? <u>70</u>

FROM	TO	PLUGGING MATERIALS	FROM	TO	PLUGGING MATERIALS
0	25.1	Bentonite			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 2/21/2023 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) 3/6/23 under the business name of Environmental Priority Service, 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.

Date: _____

Staff: _____

ID #	Depth to Water (feet below ground surface)	Total Depth (feet below ground surface)
F-1R	27.2	39.6
F-2	27.1	29.8
F-5	DRY	23
F-8	27.5	30.1
F-9	25.8	27.2
F-10	25.6	27
F-11	DRY	25.1
F-12	26.7	28
MW-1R	27.3	40.2
ACA-1S	27.5	35
ACA-1D	28	88.3
ACA-2S	27.2	34.8
ACA-2D	24.7	90
ACA-3S	27.4	35
ACA-3D	26.1	89.8