

## WATER WELL PLUGGING RECORD

Form WWC-5P

KSA 82a-1212

ID No.

MW-2

| <b>1</b> LOCATION OF WATER WELL:  | Fraction                            | Section Number   | Township Number          | Range Number            |               |                       |   |                          |                          |   |                       |                              |                          |                 |                        |                        |                 |            |                         |   |             |                   |                       |  |  |  |  |  |  |  |  |  |  |  |  |  |
|---|-------------------------------------|--|--------------------------|-------------------------|---------------|-----------------------|---|--------------------------|--------------------------|---|-----------------------|------------------------------|--------------------------|-----------------|------------------------|------------------------|-----------------|------------|-------------------------|---|-------------|-------------------|-----------------------|--|--|--|--|--|--|--|--|--|--|--|--|--|
| County: <b>Butler</b>   | <b>SE</b> ¼ <b>SW</b> ¼ <b>SE</b> ¼ | <b>22</b>  | <b>27</b>                | <b>4-East</b>           |               |                       |   |                          |                          |   |                       |                              |                          |                 |                        |                        |                 |            |                         |   |             |                   |                       |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Distance and direction from nearest town or city street address of well if located within city?<br><b>133 E. 7<sup>th</sup> Street, Augusta, Kansas</b>   |                                     |  |                          |                         |               |                       |   |                          |                          |   |                       |                              |                          |                 |                        |                        |                 |            |                         |   |             |                   |                       |  |  |  |  |  |  |  |  |  |  |  |  |  |
| <b>2</b> WATER WELL OWNER: <b>Shirley Baugher</b><br>RR#, St. Address, Box # <b>P.O. Box 56</b><br>City, State, ZIP Code : <b>Augusta, Kansas 67010</b><br>Board of Agriculture, Division of Water Resources<br>Application Number:   |                                     |  |                          |                         |               |                       |   |                          |                          |   |                       |                              |                          |                 |                        |                        |                 |            |                         |   |             |                   |                       |  |  |  |  |  |  |  |  |  |  |  |  |  |
| <b>3</b> MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:   |                                     | <b>4</b> DEPTH OF WELL <b>15.0</b> ft.<br>WELL'S STATIC WATER LEVEL <b>11.36</b> ft.<br>WELL WAS USED AS:<br><table style="width:100%"><tr><td>1 Domestic</td><td>5 Public Water Supply</td><td>9 Dewatering</td></tr><tr><td>2 Irrigation</td><td>6 Oil Field Water Supply</td><td><input checked="" type="radio"/> 10 Monitoring Well</td></tr><tr><td>3 Feedlot</td><td>7 Lawn and Garden (domestic)</td><td>11 Injection Well</td></tr><tr><td>4 Industrial</td><td>8 Air Conditioning</td><td>12 Other</td></tr></table><br>Was a chemical/bacteriological sample submitted to Department? Yes ___ No <input checked="" type="checkbox"/><br>If yes, mo/day/yr sample was submitted _____<br>Water Well Disinfected: Yes ___ No <input checked="" type="checkbox"/> |                          |                         | 1 Domestic    | 5 Public Water Supply | 9 Dewatering  | 2 Irrigation             | 6 Oil Field Water Supply | <input checked="" type="radio"/> 10 Monitoring Well | 3 Feedlot             | 7 Lawn and Garden (domestic) | 11 Injection Well        | 4 Industrial    | 8 Air Conditioning     | 12 Other               |                 |            |                         |   |             |                   |                       |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 1 Domestic  | 5 Public Water Supply               | 9 Dewatering   |                          |                         |               |                       |   |                          |                          |   |                       |                              |                          |                 |                        |                        |                 |            |                         |   |             |                   |                       |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 2 Irrigation  | 6 Oil Field Water Supply            | <input checked="" type="radio"/> 10 Monitoring Well  |                          |                         |               |                       |   |                          |                          |   |                       |                              |                          |                 |                        |                        |                 |            |                         |   |             |                   |                       |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 3 Feedlot   | 7 Lawn and Garden (domestic)        | 11 Injection Well  |                          |                         |               |                       |   |                          |                          |   |                       |                              |                          |                 |                        |                        |                 |            |                         |   |             |                   |                       |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 4 Industrial  | 8 Air Conditioning                  | 12 Other   |                          |                         |               |                       |   |                          |                          |   |                       |                              |                          |                 |                        |                        |                 |            |                         |   |             |                   |                       |  |  |  |  |  |  |  |  |  |  |  |  |  |
| <div style="display: flex; align-items: center;"><div style="flex: 1;"><p style="text-align: center;">N</p><table border="1" style="margin: auto; text-align: center;"><tr><td></td><td></td><td></td></tr><tr><td>NW</td><td></td><td>NE</td></tr><tr><td>W</td><td></td><td>E</td></tr><tr><td>SW</td><td></td><td>SE</td></tr><tr><td></td><td></td><td></td></tr><tr><td colspan="3" style="text-align: center;">S</td></tr></table></div><div style="flex: 1; padding-left: 20px;"><p>Was a chemical/bacteriological sample submitted to Department? Yes ___ No <input checked="" type="checkbox"/></p><p>If yes, mo/day/yr sample was submitted _____</p><p>Water Well Disinfected: Yes ___ No <input checked="" type="checkbox"/></p></div></div>  |                                     |  |                          |                         |               |                       |   | NW                       |                          | NE  | W                     |                              | E                        | SW              |                        | SE                     |                 |            |                         | S |             |                   |                       |  |  |  |  |  |  |  |  |  |  |  |  |  |
|   |                                     |  |                          |                         |               |                       |   |                          |                          |   |                       |                              |                          |                 |                        |                        |                 |            |                         |   |             |                   |                       |  |  |  |  |  |  |  |  |  |  |  |  |  |
| NW  |                                     | NE   |                          |                         |               |                       |   |                          |                          |   |                       |                              |                          |                 |                        |                        |                 |            |                         |   |             |                   |                       |  |  |  |  |  |  |  |  |  |  |  |  |  |
| W   |                                     | E  |                          |                         |               |                       |   |                          |                          |   |                       |                              |                          |                 |                        |                        |                 |            |                         |   |             |                   |                       |  |  |  |  |  |  |  |  |  |  |  |  |  |
| SW  |                                     | SE   |                          |                         |               |                       |   |                          |                          |   |                       |                              |                          |                 |                        |                        |                 |            |                         |   |             |                   |                       |  |  |  |  |  |  |  |  |  |  |  |  |  |
|   |                                     |  |                          |                         |               |                       |   |                          |                          |   |                       |                              |                          |                 |                        |                        |                 |            |                         |   |             |                   |                       |  |  |  |  |  |  |  |  |  |  |  |  |  |
| S   |                                     |  |                          |                         |               |                       |   |                          |                          |   |                       |                              |                          |                 |                        |                        |                 |            |                         |   |             |                   |                       |  |  |  |  |  |  |  |  |  |  |  |  |  |
| <b>5</b> TYPE OF BLANK CASING USED:<br><table style="width:100%"><tr><td>1 Steel</td><td>3 RMP (SR)</td><td>5 Wrought</td><td>7 Fiberglass</td><td>9 Other (specify below)</td></tr><tr><td><input checked="" type="radio"/> 2 PVC</td><td>4 ABC</td><td>6 Asbestos-Cement</td><td>8 Concrete Tile</td><td></td></tr></table><br>Blank casing diameter <b>2.375</b> in. Was casing pulled? Yes <input checked="" type="checkbox"/> No ___ If yes, how much? <b>15'</b><br>Casing height above or below land surface <b>Unknown</b> in. <b>Overdrilled well to 15'</b>   |                                     |  |                          |                         | 1 Steel       | 3 RMP (SR)            | 5 Wrought   | 7 Fiberglass             | 9 Other (specify below)  | <input checked="" type="radio"/> 2 PVC              | 4 ABC                 | 6 Asbestos-Cement            | 8 Concrete Tile          |                 |                        |                        |                 |            |                         |   |             |                   |                       |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 1 Steel   | 3 RMP (SR)                          | 5 Wrought  | 7 Fiberglass             | 9 Other (specify below) |               |                       |   |                          |                          |   |                       |                              |                          |                 |                        |                        |                 |            |                         |   |             |                   |                       |  |  |  |  |  |  |  |  |  |  |  |  |  |
| <input checked="" type="radio"/> 2 PVC  | 4 ABC                               | 6 Asbestos-Cement  | 8 Concrete Tile          |                         |               |                       |   |                          |                          |   |                       |                              |                          |                 |                        |                        |                 |            |                         |   |             |                   |                       |  |  |  |  |  |  |  |  |  |  |  |  |  |
| <b>6</b> GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout <input checked="" type="radio"/> 3 Bentonite <input checked="" type="radio"/> 4 Other <b>Soils</b><br>Grout Plug Intervals From <b>15.0</b> ft. to <b>3.0</b> ft. From <b>3.0</b> ft. to <b>0.0</b> ft. From ___ ft. to ___ ft.<br>What is the nearest source of possible contamination:<br><table style="width:100%"><tr><td>1 Septic tank</td><td>6 Seepage pit</td><td><input checked="" type="radio"/> 11 Fuel storage (Former)</td><td>16 Other (specify below)</td></tr><tr><td>2 Sewer lines</td><td>7 Pit privy</td><td>12 Fertilizer storage</td><td></td></tr><tr><td>3 Watertight sewer lines</td><td>8 Sewage lagoon</td><td>13 Insecticide storage</td><td></td></tr><tr><td>4 Lateral lines</td><td>9 Feedyard</td><td>14 Abandoned water well</td><td></td></tr><tr><td>5 Cess Pool</td><td>10 Livestock pens</td><td>15 Oil well/ Gas well</td><td></td></tr></table><br>Direction from well? <b>South</b> How many feet? <b>180</b> |                                     |  |                          |                         | 1 Septic tank | 6 Seepage pit         | <input checked="" type="radio"/> 11 Fuel storage (Former) | 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 |   | 5 Cess Pool | 10 Livestock pens | 15 Oil well/ Gas well |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 1 Septic tank   | 6 Seepage pit                       | <input checked="" type="radio"/> 11 Fuel storage (Former)  | 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  |                          |                         |               |                       |   |                          |                          |   |                       |                              |                          |                 |                        |                        |                 |            |                         |   |             |                   |                       |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 5 Cess Pool   | 10 Livestock pens                   | 15 Oil well/ Gas well  |                          |                         |               |                       |   |                          |                          |   |                       |                              |                          |                 |                        |                        |                 |            |                         |   |             |                   |                       |  |  |  |  |  |  |  |  |  |  |  |  |  |
| <table border="1" style="width:100%"><thead><tr><th>FROM</th><th>TO</th><th>CODE</th><th>PLUGGING MATERIALS</th></tr></thead><tbody><tr><td><b>0.0</b></td><td><b>3.0</b></td><td></td><td><b>Compacted soils</b></td></tr><tr><td><b>3.0</b></td><td><b>15.0</b></td><td></td><td><b>Bentonite chips</b></td></tr><tr><td> </td><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td><td> </td></tr></tbody></table>  |                                     |  |                          |                         | FROM          | TO                    | CODE  | PLUGGING MATERIALS       | <b>0.0</b>               | <b>3.0</b>  |                       | <b>Compacted soils</b>       | <b>3.0</b>               | <b>15.0</b>     |                        | <b>Bentonite chips</b> |                 |            |                         |   |             |                   |                       |  |  |  |  |  |  |  |  |  |  |  |  |  |
| FROM  | TO                                  | CODE   | PLUGGING MATERIALS       |                         |               |                       |   |                          |                          |   |                       |                              |                          |                 |                        |                        |                 |            |                         |   |             |                   |                       |  |  |  |  |  |  |  |  |  |  |  |  |  |
| <b>0.0</b>  | <b>3.0</b>                          |  | <b>Compacted soils</b>   |                         |               |                       |   |                          |                          |   |                       |                              |                          |                 |                        |                        |                 |            |                         |   |             |                   |                       |  |  |  |  |  |  |  |  |  |  |  |  |  |
| <b>3.0</b>  | <b>15.0</b>                         |  | <b>Bentonite chips</b>   |                         |               |                       |   |                          |                          |   |                       |                              |                          |                 |                        |                        |                 |            |                         |   |             |                   |                       |  |  |  |  |  |  |  |  |  |  |  |  |  |
|   |                                     |  |                          |                         |               |                       |   |                          |                          |   |                       |                              |                          |                 |                        |                        |                 |            |                         |   |             |                   |                       |  |  |  |  |  |  |  |  |  |  |  |  |  |
|   |                                     |  |                          |                         |               |                       |   |                          |                          |   |                       |                              |                          |                 |                        |                        |                 |            |                         |   |             |                   |                       |  |  |  |  |  |  |  |  |  |  |  |  |  |
|   |                                     |  |                          |                         |               |                       |   |                          |                          |   |                       |                              |                          |                 |                        |                        |                 |            |                         |   |             |                   |                       |  |  |  |  |  |  |  |  |  |  |  |  |  |
|   |                                     |  |                          |                         |               |                       |   |                          |                          |   |                       |                              |                          |                 |                        |                        |                 |            |                         |   |             |                   |                       |  |  |  |  |  |  |  |  |  |  |  |  |  |
|   |                                     |  |                          |                         |               |                       |   |                          |                          |   |                       |                              |                          |                 |                        |                        |                 |            |                         |   |             |                   |                       |  |  |  |  |  |  |  |  |  |  |  |  |  |
| <b>7</b> CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/yr) <b>11/09/04</b> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <b>692</b> This Water Well Record was completed on (mo/day/yr) <b>11/10/04</b> under the business name of <b>Quad State Services, Inc.</b> by (signature) <i>[Signature]</i>  |                                     |  |                          |                         |               |                       |   |                          |                          |   |                       |                              |                          |                 |                        |                        |                 |            |                         |   |             |                   |                       |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 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.  |                                     |  |                          |                         |               |                       |   |                          |                          |   |                       |                              |                          |                 |                        |                        |                 |            |                         |   |             |                   |                       |  |  |  |  |  |  |  |  |  |  |  |  |  |

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