

WATER WELL PLUGGING RECORD Form WWC-5P

KSA 82a-1212

ID NO.

MW-7

1 LOCATION OF WATER WELL: County: Butler	Fraction ne ¼ ne ¼ nw ¼ ne ¼	Section Number 27	Township Number T 27 S	Range Number 4 <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 ☐ 115 E 7th Ave, Augusta

Global Positioning Systems (GPS) information:

Latitude: **37.67908** (in decimal degrees)Longitude: **96.9779** (in decimal degrees)

Elevation:

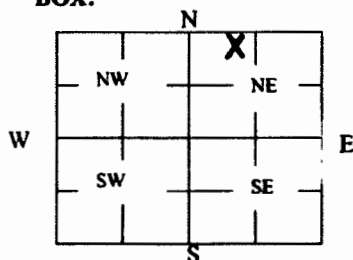
Horizontal Datum: ☐ WGS84, ☒ NAD83, ☐ NAD27

Collection Method:

☒ GPS unit (Make/Model: **Garmin**)☐ Digital Map/Photo, ☐ Topographic Map, ☐ Land SurveyEst. Accuracy: ☐ < 3 m, ☒ 3-5 m, ☐ 5-15 m, ☐ > 15 m

2 WATER WELL OWNER: **Conoco Phillips**
RR#, St. Address, Box #: **1614-02 Phillips Bldg.**
City, State ZIP Code: **Bartlesville, OK 74004**

3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:

4 DEPTH OF WELL **18.12** ft.WELL'S STATIC WATER LEVEL **9.07** ft

WELL WAS USED AS:

☐ Domestic
☐ Irrigation
☐ Feedlot
☐ Industrial

☐ Public Water Supply
☐ Oil Field Water Supply
☐ Domestic (Lawn & Garden)
☐ Air Conditioning

☒ Dewatering
☐ Monitoring
☐ Injection Well
☐ Other
Was a chemical/bacteriological sample submitted to Department? Yes ☐ No ☒

5 TYPE OF BLANK CASING USED:

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

Blank casing diameter **2** in. Was casing pulled? Yes ☐ No ☒ If yes, how much _____
 Casing height above or below land surface **-10** in.

6 GROUT PLUG MATERIAL: ☐ Neat cement ☐ Cement grout ☒ Bentonite ☐ OtherGrout Plug Intervals: From **0.8** ft. to **18.12** ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.

What is the nearest source of possible contamination:

☐ Septic tank
☐ Sewer lines
☐ Watertight sewer lines
☐ Lateral lines
☐ Cess pool

☐ Seepage pit
☐ Pit privy
☐ Sewage lagoon
☐ Feedyard
☐ Livestock pens

☐ Fuel storage
☐ Fertilizer storage
☐ Insecticide storage
☐ Abandoned water well
☐ Oil well/Gas well
☐ Other (specify below)**Gas station tanks**Direction from well? **Southwest**How many feet? **30**

FROM	TO	PLUGGING MATERIALS	FROM	TO	PLUGGING MATERIALS
0.8	18.12	BENTONITE CHIPS			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) **08/31/2016** and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **416**. This Water Well Record was completed on (mo/day/year) **08/31/2016** under the business name of **Terracon Consultants, 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.

KSA82a-1212

Revised 1/20/2015