KSA 82a-1212

Form WWC-5P

ID NO. MW-4

| 1 | LOCATI | ON OF W | ATER WELL: | | Fraction | Section Number | Township Numbe | r Range Number | |
|---|-----------------------|------------|--------------|--|---|---|--------------------|----------------|--|
| Co | l unty: ∖ | 11/40 | 1/1 | W | W ₁₄ NW ₁₄ NE ₁₄ | lb | 295 | 16 TEN | |
| Distance and direction from nearest town or city street address of well if located within city? | | | | | | | | | |
| K-47 Hwy. Paulney St., Altona | | | | | | | | | |
| WATER WELL OWNER: Jahrthewy Loot RR #, St. Address, Box #: 411 W. 14th St. Board of Agriculture, Division of Water Resources | | | | | | | | | |
| RR #, St. Address, Box #: City, State, ZIP Code : Charufe, KS Board of Agriculture, Division of Water Resources Application Number: | | | | | | | | urces | |
| 3 | | WELL'S LO | OCATION WITH | | 4 DEPTH OF WELL | ft. | | | |
| | AN "X" | IN SECTION | JN BOX: | | WELL'S STATIC WATE | R LEVEL ft. | | | |
| | | | | | WELL WAS USED AS: | | | | |
| | NW | | NE | | 1 Domestic | 5 Public Water Supply | | | |
| | | | | | 2 Irrigation3 Feedlot | 6 Oil Field Water Supp7 Domestic (Lawn & G | iarden) 11 Injecti | | |
| W | | | | E | 4 Industrial | 8 Air Conditioning | 12 Other | Υ | |
| | sw | | SE | | Was a chemical / bacteriologif yes, mo/day/yr sample wa | gical sample submitted to De | epartment? Yes | No | |
| | | | | | | V | | | |
| | L | S | | | Water Well Disinfected: Ye | s No | | | |
| 5 TYPE OF BLANK CASING USED: | | | | | | | | | |
| 1 Steel 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (Specify below) | | | | | | | | | |
| Blank casing diameter | | | | | | | | | |
| Blank casing diameter | | | | | | | | | |
| 6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Sentonite 4 Other | | | | | | | | | |
| Grout Plug Intervals: From | | | | | | | | | |
| What is the nearest source of possible contamination: 1 Septic tank 6 Seepage pit 1 Fuel storage 16 Other (specify below) | | | | | | | | enecify helow) | |
| 1 Septic tank 2 Sewer lines | | | | | 7 Pit privy | 12 Fertilizer storage | | | |
| Watertight sewer lines Lateral lines | | | | 8 Sewage lagoon9 Feedyard | 13 Insecticide storage14 Abandoned water | | | | |
| 5 Cess pool 10 Livestock pens 15 Oil well/Gas well | | | | | | | | | |
| Direction from well? How many feet? | | | | | | | | | |
| | FROM | то | | PLUC | GGING MATERIALS | | | | |
| 15 | | 3 | HYDRA | 10) |) BENTONITE | | | | |
| | 3 | 0 | NATIVI | E S |) BENTONITE OILS TO SURFACE | E | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) | | | | | | | | | |
| Water Well Record was completed on (mo/day/year) | | | | | | | | | |
| | (mo/day/year)05/13/08 | | | | | | | | |
| INSTRUCTIONS: Use typewriter or ball point pen. Please press firmly and print clearly. Please fill in blanks, underline 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.