

WATER WELL PLUGGING RECORD

ORIGINAL

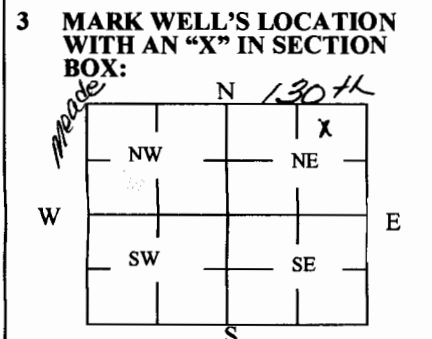
Form **KSA 82a-1212** ID NO.

1 LOCATION OF WATER WELL: Fraction NE 1/4 NE 1/4 Section Number 2 Township Number T 29 S Range Number 19 E W
 County: Neosho

Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here
130th + Meade + E

Global Positioning Systems (GPS) information:
 Latitude: 37.557857 (in decimal degrees)
 Longitude: -95.292563 (in decimal degrees)
 Elevation: _____
 Datum: WGS84, NAD83, NAD27
 Collection Method: Google map
 GPS unit (Make/Model: _____)
 Digital Map/Photo, Topographic Map, Land Survey
 Est. Accuracy: < 3 m, 3-5 m, 5-15 m, > 15 m

2 WATER WELL OWNER: Ryan Berg
 RR#, St. Address, Box #: _____
 City, State ZIP Code: rpberg@yahoo.com



4 DEPTH OF WELL 15 ft.
 WELL'S STATIC WATER LEVEL 0 ft (Dry)
 WELL WAS USED AS:
 Domestic (old) Public Water Supply Dewatering
 Irrigation Oil Field Water Supply Monitoring
 Feedlot Domestic (Lawn & Garden) Injection Well
 Industrial Air Conditioning Other _____
 Was a chemical/bacteriological sample submitted to Department? Yes No

5 TYPE OF BLANK CASING USED:
 Steel RMP (SR) Wrought Fiberglass Other (Specify below)
 PVC ABS Asbestos-Cement Concrete Tile Hand Dug Rock Lined.
 Blank casing diameter 120 (in.) ^(10 ft.) Was casing pulled? Yes No If yes, how much _____
 Casing height above or below land surface 0 in.

6 GROUT PLUG MATERIAL: Neat cement Cement grout Bentonite Other _____
 Grout Plug Intervals: From 15 ft. to 3 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 What is the nearest source of possible contamination:
 Septic tank Seepage pit Fuel storage Other (specify below)
 Sewer lines Pit privy Fertilizer storage unknown
 Watertight sewer lines Sewage lagoon Insecticide storage _____
 Lateral lines Feedyard Abandoned water well _____
 Cess pool Livestock pens Oil well/Gas well _____
 Direction from well? _____
 How many feet? _____

FROM	TO	PLUGGING MATERIALS	FROM	TO	PLUGGING MATERIALS
<u>15</u>	<u>4</u>	<u>Clean Rock</u>			
	<u>4</u>	<u>Cement Grout</u>			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) _____ and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 591. This Water Well Record was completed on (mo/day/year) 2/5/2019 under the business name of K-12 Oil Well Serv. Inc. by (signature) Jim Repley

INSTRUCTIONS: Use typewriter or ballpoint 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: 785/296-5524. Send one to Water Well Owner and retain one for your records. Visit us at <http://www.kdheks.gov/waterwell/index.html>.