		ELL PLUGG	ING REC	ORD		Form \	WWC-5P		KSA 82a-1212	ID No	MW-1
1 LOCATI	ON OF WAT	ER WELL:	Fraction	1					Section Number	Township Number	Range Number
County:	Monto	jomery	NE	1/4	NE	1/4	NE	1/4	17	32	17-East
								_	ated within city?		
312 S. Liberty, Cherryvale, Kansas											
2 WATER WELL OWNER: Crescent Oil Company											
RR#, St. Address, Box # 1020 W. Sycamore Street Board of Agriculture, Division of Water Resources											
City, State, ZIP Code : Independence, Kansas 67301 Application Number:											
3 MARK V	VELL'S LOC	ATON WITH X:	AN 4 5	EDTU	OE W.			11	5 ft.		
H , IN 3	ECTION BO N	Λ.	\vdash	EPIH	OF WE	·		!!!	π.		
WELL'S STATIC WATER LEVEL 8.21 ft.											
	!										
	NW ————	· w	WELL WAS USED AS:								
	``` T	NE		1	Dome	etio	5.0	Dublio	Water Supply	9 Downtor	na.
w	E	1 Domestic 2 Irrigation				5 Public Water Supply 6 Oil Field Water Supply  Monitoring Well					
"	-	3 Feedlot				7 Lawn and Garden (domestic) 11 Injection Well					
			4	Indust	rial			nditioning	-		
<b>⊢</b>	sw —	Was a	chemi	cal/hac	teriolog	nical sampl	le suh	mitted to Department	2 Yes	No X	
Was a chemical/bacteriological sample submitted to Department?  Yes No X  If yes, mo/day/yr sample was submitted											<u> </u>
Water Well Disinfected: Yes No X											
5											
5 TYPE OF BLANK CASING USED:											
1 Steel 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (specify below)  2 PVC 4 ABC 6 Asbestos-Cement 8 Concrete Tile											
Blank casing diameter 2.375 in. Was casing pulled? Yes No x If yes, how much? N/A											
Casing height above or lead land surface Unknown in. Casing plugged; casing removed to depth of 3' BTOC.											
GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other Soils/Concrete											
Grout Plug Intervals From 11.5 ft. to 3.0 ft. From 3.0 ft. to 1.0 ft. From 1.0 ft. to 0.0 ft.											
What is the nearest source of possible contamination:											
VVIIdtis	tile liealest	source or pos	Sible Colle	ammau	OII.		_				
1 Se	ptic tank		6 Seepa	ge pit			<b>(1)</b> Fι	uel sto	orage	16 Other (specify i	oelow)
			•	7 Pit privy			12 Fertilizer storage				
3 Wa	_	3 Sewage lagoon			13 Insecticide storage						
	eral lines		9 Feedy						ned water well		
5 Ce	ss Pool		10 Livesto	ock per	าร		15 Oi	il well	Gas well		
Direction from well? East How many feet? 25											
FROM	то	CODE			PLUG	GING	MATERIAL	<u> </u>			
0.0	1.0		noroto		1 200	Onto					
			Concrete								
1.0	3.0	Compacted Soils									
3.0	11.5	Ве	ntonite	chips	<u> </u>						
THE STATE OF											
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed											
⊢ ~~``		S OR LANDO									
on (mo/day/yr) 10/17/07 and this record is true to the best of my knowledge and belief. Kansas											
Water Well Contractor's License No. / 692 This Water Well Record was completed on (mo/day/yr)  10/19/07 / under the business name of Quad State Services, Inc.											
			f unde	er the l	ousine	ss nar					
	(signature)				V(						
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.											
Envir	onment, Bu	ureau of Wa iter Well Ow	ater, 1000	S W	Jacks	on St.	., Ste. 420	U, To	peka, Kansas 666	20-0001. Telephone	: 785-296-3565.
Send	OHE TO MAS	ITEL AVEILON	vilei and	retain	OHE I	or you	records	٠.			