

MW7

1 LOCATION OF WATER WELL: County: Montgomery Fraction 1/4 NE 1/4 SE 1/4 Section Number 8 Township Number T 32 S Range Number 17 [X] E [] W

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

~50' W of 209 N. Liberty, Cherryvale, KS 67335

Global Positioning Systems (GPS) information:

Latitude: NA (in decimal degrees) Longitude: NA (in decimal degrees) Elevation: NA

Horizontal Datum [] WGS84, [] NAD83, [] NAD27

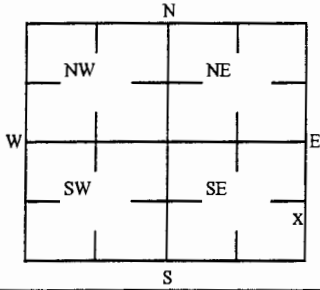
Collection Method:

2 WATER WELL OWNER: Greenfield Environmental RR#, St. Address, Box #: 1920 232nd Place SE City, State ZIP Code: Bothell, WA 98021

[] GPS unit (Make/model: _____) [] Digital Map/Photo, [] Topographic Map [] Land Survey

Est. Accuracy: [] <3 m, [] 3-5 m, [] 5-15 m, [] >15 m

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



4 DEPTH OF WELL 9.8 ft. MW7

WELL'S STATIC WATER LEVEL NA 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 [X]

5 TYPE OF BLANK CASING USED:

- Steel, RMP (SR), Wrought, Fiberglass, Other (Specific below), PVC, ABS, Asbestos-Cement, Concrete Tile

Blank casing diameter 2 in. Was casing pulled? Yes [X] No [] If yes, how much 3 ft Casing height above or below land surface NA in.

6 GROUT PLUG MATERIAL: [] Neat cement [] Cement grout [X] Bentonite [X] Other Gravel: 0-1; Soil: 1-3

Grout Plug Intervals: From 3 ft to 9.8 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, Feed yard, Livestock pens, Fuel storage, Fertilizer storage, Insecticide storage, Abandoned water well, Oil well/Gas well, Other (specify below)

Direction from well? _____ How many feet? _____

Table with columns: FROM, TO, PLUGGING MATERIALS. Rows show 0-1 Gravel, 1-3 Soil, 3-9.8 Bentonite. Includes KDHE ID: Kerr McGee #6099; U3-063-14548

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 10/20/2016 and this record is true to the best of my knowledge and belief. Kansas Water Contractor's License No. 757. This Water Well Record was completed on (mo/day/year) 10/21/2016 under the business name of Larsen & Associates, Inc. By (signature) _____

Send one white copy to Kansas Department of Health & Environment, Geology Section, 1000 SW Jackson Street, Ste. 400 Topeka, KS 66612-1367. Visit us at http://www.kdheks.gov/waterwell/index.html Telephone 785-296-5524.