

## WATER WELL PLUGGING RECORD Form WWC-5P

KSA 82a-1212

ID NO.

CSI C3-AS

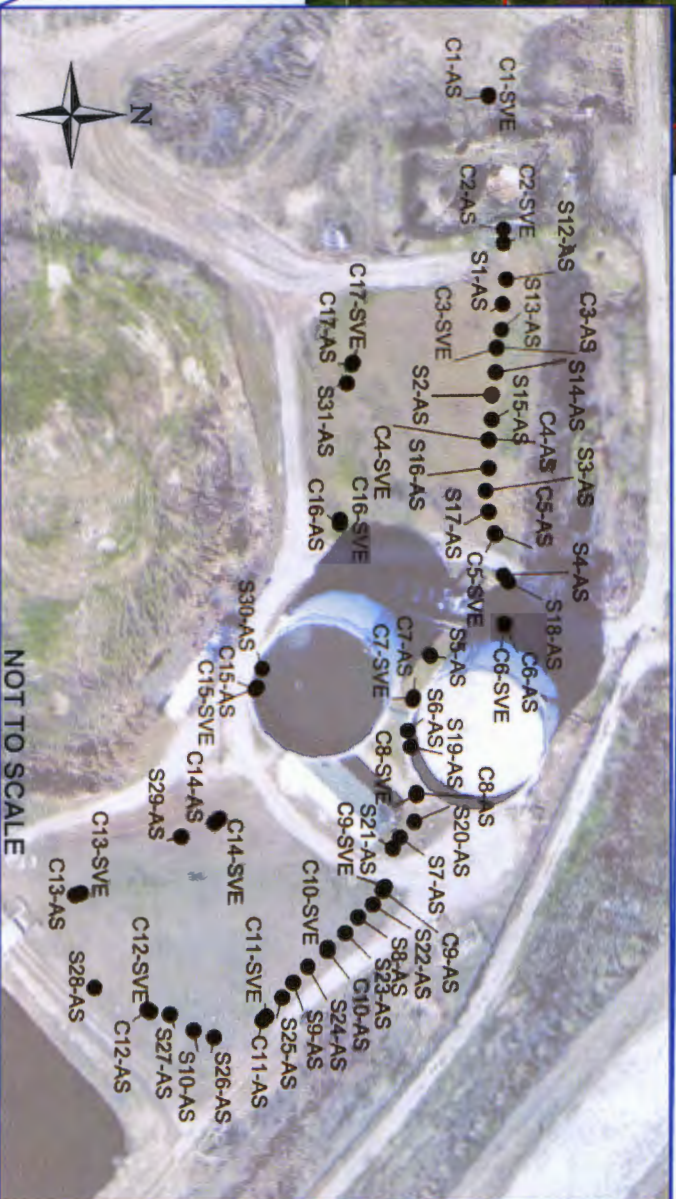
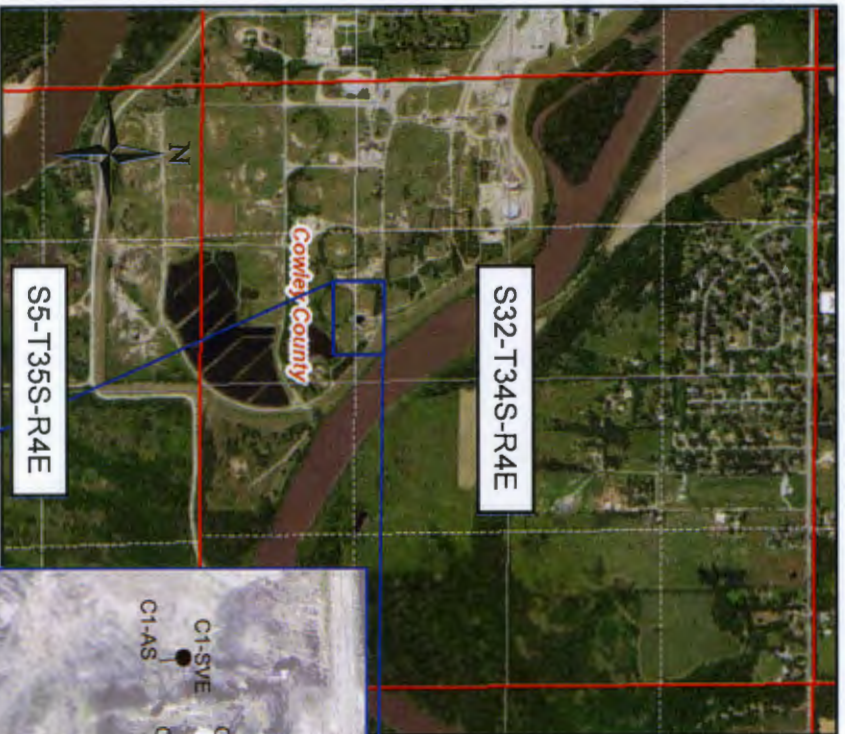
<b>1 LOCATION OF WATER WELL:</b> County: Cowley	Fraction SE ¼ SW¼ NE ¼ SW ¼	Section Number 32	Township Number T 34 S	Range Number 4 <input checked="" type="checkbox"/> E <input type="checkbox"/> W																																																
Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here <input checked="" type="checkbox"/>		<b>Global Positioning Systems (GPS) information:</b> Latitude: 37.04589 (in decimal degrees) Longitude: -97.01565 (in decimal degrees) Elevation: 1070 Horizontal Datum: <input type="checkbox"/> WGS84, <input checked="" type="checkbox"/> NAD83, <input type="checkbox"/> NAD27 Collection Method:																																																		
<b>2 WATER WELL OWNER:</b> MRP Properties Company, LLC RR#, St. Address, Box #: 1400 South M Street City, State ZIP Code: Arkansas City, KS 67005		<input type="checkbox"/> GPS unit (Make/Model: _____) <input checked="" type="checkbox"/> Digital Map/Photo, <input checked="" type="checkbox"/> Topographic Map, <input type="checkbox"/> Land Survey Est. Accuracy: <input type="checkbox"/> < 3 m, <input checked="" type="checkbox"/> 3-5 m, <input type="checkbox"/> 5-15 m, <input type="checkbox"/> > 15 m																																																		
<b>3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:</b> <div style="text-align: center;"> </div>	<b>4 DEPTH OF WELL</b> 45.5 <b>ft.</b> WELL'S STATIC WATER LEVEL 26.57 <b>ft</b> WELL WAS USED AS: <div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> Domestic  <input type="checkbox"/> Irrigation  <input type="checkbox"/> Feedlot  <input type="checkbox"/> Industrial         </div> <div> <input type="checkbox"/> Public Water Supply  <input type="checkbox"/> Oil Field Water Supply  <input type="checkbox"/> Domestic (Lawn &amp; Garden)  <input type="checkbox"/> Air Conditioning         </div> <div> <input type="checkbox"/> Dewatering  <input type="checkbox"/> Monitoring  <input type="checkbox"/> Injection Well  <input checked="" type="checkbox"/> Other Air Sparge         </div> </div> Was a chemical/bacteriological sample submitted to Department? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>																																																			
<b>5 TYPE OF BLANK CASING USED:</b> <div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> Steel  <input checked="" type="checkbox"/> PVC         </div> <div> <input type="checkbox"/> RMP (SR)  <input type="checkbox"/> ABS         </div> <div> <input type="checkbox"/> Wrought  <input type="checkbox"/> Asbestos-Cement         </div> <div> <input type="checkbox"/> Fiberglass  <input type="checkbox"/> Concrete Tile         </div> <div> <input type="checkbox"/> Other (Specify below) _____         </div> </div> Blank casing diameter 2 in. Was casing pulled? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> If yes, how much 3.0 ft AGS to 1 ft BGS Casing height above or below land surface 36.0 in.																																																				
<b>6 GROUT PLUG MATERIAL:</b> <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Cement grout <input type="checkbox"/> Bentonite <input type="checkbox"/> Other _____ Grout Plug Intervals: From 1 ft. to 45.5 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft. What is the nearest source of possible contamination: <div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> Septic tank  <input type="checkbox"/> Sewer lines  <input type="checkbox"/> Watertight sewer lines  <input type="checkbox"/> Lateral lines  <input type="checkbox"/> Cess pool         </div> <div> <input type="checkbox"/> Seepage pit  <input type="checkbox"/> Pit privy  <input type="checkbox"/> Sewage lagoon  <input type="checkbox"/> Feedyard  <input type="checkbox"/> Livestock pens         </div> <div> <input type="checkbox"/> Fuel storage  <input type="checkbox"/> Fertilizer storage  <input type="checkbox"/> Insecticide storage  <input type="checkbox"/> Abandoned water well  <input type="checkbox"/> Oil well/Gas well         </div> <div> <input checked="" type="checkbox"/> Other (specify below)          Located at former refinery         </div> </div> Direction from well? _____ How many feet? _____																																																				
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>FROM</th> <th>TO</th> <th>PLUGGING MATERIALS</th> <th>FROM</th> <th>TO</th> <th>PLUGGING MATERIALS</th> </tr> </thead> <tbody> <tr> <td>0 ft.</td> <td>1 ft.</td> <td>Medium bentonite chips</td> <td></td> <td></td> <td></td> </tr> <tr> <td>1 ft.</td> <td>45.5 ft.</td> <td>Neat cement grout</td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td>The plugging method was approved by KDHE, email from Pam Chaffee to Jay Mednick May 10, 2017.</td> </tr> <tr><td></td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td></td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td></td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td></td><td></td><td></td><td></td><td></td><td></td></tr> </tbody> </table>					FROM	TO	PLUGGING MATERIALS	FROM	TO	PLUGGING MATERIALS	0 ft.	1 ft.	Medium bentonite chips				1 ft.	45.5 ft.	Neat cement grout									The plugging method was approved by KDHE, email from Pam Chaffee to Jay Mednick May 10, 2017.																								
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<b>7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:</b> This water well was plugged under my jurisdiction and was completed on (mo/day/year) 06/09/2017 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. Owner _____. This Water Well Record was completed on (mo/day/year) 06/27/2017 under the business name of MRP Properties Company, LLC by (signature) <i>[Signature]</i>																																																				

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



# **EXPLANATION**

AS – Air Sparge  
SVE – Soil Vapor Extraction  
WWC-5P plugging records submitted for each SVE and AS well

TITLE:

**Location of Plugged & Abandoned SVE & AS Wells – CSI System**

PROJECT:

**MRP PROPERTIES COMPANY, LLC  
ARKANSAS CITY, KANSAS**



Figure No.:  
**1**