WATER WELL PLUGGING RECORD Form WWC-5P KSA 82a-1212 ID NO. LOCATION OF WATER WELL: Section Number Township Number Fraction Range Number 1/4 NW 1/4 NW1/4 NW 1/4 County: Atchison T 6 21 $\mathbf{Z} \in \mathbf{W}$ Global Positioning Systems (GPS) information: Street/Rural Address of Well Location; if unknown, distance & Latitude: 39,55987 (in decimal degrees) direction from nearest town or intersection: If at owner's address, Longitude: (in decimal degrees) check here 405 Utah St. Elevation: Atchison KS WGS84. □ NAD83, □ NAD27 Horizontal Datum: Collection Method: GPS unit (Make/Model: Garmin etrek 10 WATER WELL OWNER: Shell Oil Products US Digital Map/Photo, D Topographic Map, D Land Survey RR#, St. Address, Box #: 308 Wilcox; No. 101 City, State ZIP Code: Castle Rock CO 80404 Est. Accuracy: $\square < 3 \text{ m}$, $\square 3-5 \text{ m}$, $\square 5-15 \text{ m}$, $\square > 15 \text{ m}$ MARK WELL'S LOCATION DEPTH OF WELL ft. WITH AN "X" IN SECTION BOX: WELL'S STATIC WATER LEVEL _____ ft WELL WAS USED AS: Dewatering Domestic Public Water Supply Irrigation Oil Field Water Supply Monitoring W Feedlot Domestic (Lawn & Garden) Injection Well Ε Industrial Air Conditioning Other swSE Was a chemical/bacteriological sample submitted to Department? Yes No 🚺 TYPE OF BLANK CASING USED: Other (Specify below) RMP (SR) Fiberglass Wrought Steel **✓** PVC ABS Asbestos-Cement Concrete Tile Blank casing diameter 2 in. Was casing pulled? Yes V No I If yes, how much Casing height above or below land surface ____ in. Neat cement Cement grout Bentonite Other **GROUT PLUG MATERIAL:** From ft. to ft. From **2** ft. to **15** ft., Grout Plug Intervals: 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 Watertight sewer lines Sewage lagoon Insecticide storage Lateral lines Feedvard Abandoned water well Direction from well? Cess pool Livestock pens Oil well/Gas well How many feet? PLUGGING MATERIALS PLUGGING MATERIALS FROM TO Cancale

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completed on (mo/day/year) 07/30/2015 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 710 . This Water Well Record was completed on (mo/day/year) 07/31/2105 under the _____ by (signature) _____ business name of Below Ground Surface, Inc.

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