W	VATER WELL PLUGGING RECO	RD Form WWC-5P	KSA 82a-1212	ID NO.	
1	LOCATION OF WATER WELL County: Leavenworth	SW 1/4 NW 1/4 SV	Section Number 26	88	Range Number 22E
	Distance and direction from nearest	town or city street address	of well if located within	n city?	
13	321 W. Ottawa St, Leavenworth, KS				
2	WATER WELL OWNER: Capit	al Electric Line Builders		System (decimal degrees	. min. of 4 digits)
	RR#, St. Address, Box #: 1428	W 0th C+	Latitude:		
	RRπ, St. Addless, Box π. 1426	W. 9 St.	Elevation:		
	City, State, ZIP Code: Kansa	as City, MO 64101-1220	Datum:		
3	MARK WELLS LOCATON	4 DEDTH OF WE	Data Collection M		
3	MARK WELL'S LOCATON WITH AN "X" IN SECTION	4 DEFINOR WEL	LL 17.10	IL. IVI W O	
	BOX:	WELL'S STATIC	WATER LEVEL	ft.	
	N	WELL WAS USE	D AS:		
		1 Domestic	5 Public Water Supply	y 9 Dewatering	•
	NW NE	2 Irrigation	6 Oil Field Water Supply		
	W	3 Feedlot	7 Domestic (Lawn &	Garden) II Injection \	Well
	sw — se —	4 Industrial	8 Air Conditioning	12 Other	
	s	Was a chemical/	bacteriological sample s	ubmitted to Department	? Yes No _X
5	TYPE OF BLANK CASING USEI):			
	1 Steel 3 RMP (SR) 5 V	Vrought 7 Fib		Other (specify below)	
(2)PVC 4 ABS 6 A	sbestos-Cement 8 Co	oncrete Tile	· · · · · · · · · · · · · · · · · · ·	
	Blank casing diameter 2 in. V	Vas casing pulled? Yes	X No If yes, how	much 3.0ft	
	Casing height above or below land su	irface in.			
6	GROUT PLUG MATERIAL: 1	Neat cement 2 Cement	grout 3)Bentonite	Other Soil 0-3ft	
(Grout Plug Intervals: From 3	ft. to 17.10 ft.			
,	What is the nearest source of possible	contamination:			
	1 Septic tank 6 Seepag 2 Sewer lines 7 Pit priv	e pit 11 Fuel sto	rage 16 Other	(specify below)	
	2 Sewer lines / Pit priv 3 Watertight sewer lines 8 Sewag	y 12 Fertilize	er storage ide storage		
	4 Lateral lines 9 Feedya	rd 14 Abando	ned water well Direc	tion from well?	
	5 Cess pool 10 Livesto	ock pens 15 Oil wel	l/Gas well How	many feet?	
٦	FROM TO PLUGGIN	IG MATERIALS	FROM TO	PLUGGING M.	ATERIALS
	0 3	Soil			
-	3 17.10 B	entonite			
-				4.000	
-					
<u>_</u>			İ		
	CONTRACTOR'S OR LANDOW ompleted on (mo/day/year) 1			s plugged under my juris If my kno <u>wledge</u> and bel	
				etea on (mo/day/year)	
	usiness name of Larsen and		by (signature)		
IN	NSTRUCTIONS: Please till in blank	s or circle the correct answ	wers. Send top three co	piesto Kansas Departme	ent of Health and
Et	nvironment. Bureau of Water. Geolog	y Section, 1000 SW Jacks	on St., Ste. 420. Topeka	a. Kansas 66612-1367.	Telephone:
9	85/296-5522. Send one to Water Wel	I Owner and retain one for	your records. Visit us	at http://www.kuneks.gc	waterwen.

Well Abandoment Form

Site	Site: Capital Electric Line Builders, Inc.	ric Line Builde	ers, Inc.					•	Field Staff: //	M
Date:	7 5	- 001	Simolar, NO							
Well #	Well Total Depth	Total Casing Footage Pulled	Surface Cover Interval	Surface Cover Type (soil/ concrete/ asphalt)	Interval Plugged with Soil	Interval Plugged with Bentonite	Time	KDHE Well Lock (old)	KDHE Well Tag	NOTES
MWI	ũ	0	ن ي	SKĈłA	3 3 1 1	3.01 20.85	0530	0267489	00359894 ////	×4514.
MW2	14 53	13.0	() () ()	(§)/ C / A	03.0	36. 19.55	.		00359887	
MW4	18 30	., 0	00	S AQJ/ A	. B. 3.0"	30-1830			n/p	Vaste to had Cotte To
MW5	1, 115	15.00	A	(S)/ C / A	0.3/0	3.0 11,45	1000	0267535 " <i>A)</i>	M	
MW6	37.00	3 0	(1.3.01	(ŜJC/A	0.3.0	3.0 : 1710	1145	0267426 NH	00359849	
MW7	1. 1.0	70	0.30	SVC/A	0 3.0"	3.0-13.50	1020	0267499 _{//AH}	00359856	
				S/C/A						
				S/C/A						
				SICIA						
				S/C/A						
:				SICIA		-				
:				S/C/A						
:				S/C/A						
				S/C/A						·
		- Andrew Commence Com		S/C/A						
Observations:	Olts:	,,,,,	1.1 12	1,367	inokal eleterter 1	" I Measurement's	ments to	mw > wed	notel dekite	
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						,	1	1 2 4 4	316 4000016	

Field Staff Signature:

I Mh. of Tools used.

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