1" metal **VEW-12** WATER WELL PLUGGING RECORD Form WWC-5P KSA 828-1212 Fraction 1 LOCATION OF WATER WELL: Section Number Township Number Range Number 1/2 SW 1/2 NW 1/2 SW 10 14 Thomas 32 County: Distance and direction from nearest town or city street address of well if located within city? JJ Oil Company (Oakley) 2 WATER WELL OWNER: JJ Oil Company #6 RR#, St. Address, Box # Board of Agriculture, Division of Water Resources City, State, ZIP Code : Oakley, KS 67748 Application Number: 3 MARK WELL'S LOCATON WITH AN XY IN SECTION BOX: . 85 **ft.** DEPTH OF WELL X WELL'S STATIC WATER LEVEL ft. WELL WAS USED AS: 1 Domestic 5 Public Water Supply 9 Dewatering 10 Monitoring Well 2 Irrigation 8 Of Field Water Supply W E 3 Feedlot 11 Injection Well 7 Lawn and Garden (domestic) 8 Air Conditioning (12)Other 4 Industrial ŔR Yes No X Was a chemical/bacteriological sample submitted to Department? If yes, mo/day/yr sample was submitted Water Well Disinfected: Yes No 5 5 TYPE OF BLANK CASING USED: 3 RIMP (SR) 5 Wrought 7 Fiberglass 1 Steel 9 Other (specify below) (2)PVC 5 Asbestos-Cament 8 Concrete Tile 4 ABC Blank casing diameter 2 in. Was casing pulled? Yes X No If yes, how much removed 3 feet Casing height above or below land surface -36(3)Bentonite 4 Other 6 GROUT PLUG MATERIAL: 1 Next cament 2 Cement grout Grout Plug Intervals From 6. to 85 ft. From ft. to ft. From ft. to ft. What is the nearest source of possible contamination: 1 Sectic tank 6 Seepage pit 11 Fuel storage 16 Other (specify below) 2 Sewer lines 7 Ptt privy 12 Fertilizer storage 3 Watertight sewer lines 8 Sewage legoon 13 Insecticide storage 4 Lateral lines 9 Feedyard 14 Abandoned water well 10 Livestock pens 15 Oil well/ Gas well 5 Cess Pool Direction from well? How many feet? CODE PLUGGING MATERIALS FROM TO 85 Bentonite 0 RECEIVED 0005 8 0 MAL BUREAU OF WATER

| CONTRACTOR'S OR LANDO        | WNER'S CERTIFICA | TION: This water | er well was plugged under my jurisdiction and was completed        |    |
|------------------------------|------------------|------------------|--|----|
| on (mo/day/yr)               | 6/26/07          | anc              | d this record is true to the best of my knowledge and belief. Kens | 24 |
| Water Well Contractor's Lice | ense No.         | 554              | This Water Well Record was completed on (mo/day/yr)                |    |
| 7/2/07                       | under the busine | ess name of      | Jay Woofter Pump and Well  |    |
| by (signature)               |                  |                  | Joy Works 1, 111 fay ( Woodle                                      |    |
| <br>                         |                  |                  |  |    |

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. Send one to Water Well Owner and retain one for your records.