| v | VATED WE | a a Britis | GING RECORD | ING RECORD Form WWC-5P | | ID No. SVE-2 | |
|--|----------------|------------------|--|------------------------|--|---|--------------------------------|
| - | ON OF WAT | ER WELL | | | Section Number | Township Number 11S | Range Number 11VV |
| | and direction | n from ne | parest town or city stre | et address of well if | located within city? | | |
| RR#, St. A | Address, Bo | 文# 4 09 E | ity Oil Company First | 30, 2000, 10 | | of Agriculture, Division | of Water Resources |
| City, State | ZIP Code | Lucas | | | Applic | ation Number: | |
| | ECTION BO | | 4 DEPTH OF | WELL 32 | A. | | |
| | N | | _ WELL'S STA | ATIC WATER LEVEL | 29 _{ft.} | | |
| × | | NE | WELL WAS | | 7 | | |
| | ''' - T | i | 1 00 | mestic 5 Pul | blic Water Supply | 9 Dewaterk | |
| w | | | 1 - 1 | | Fleid Water Supply | 10 Monitorin | |
| | | | 3 Fee | | vn and Garden (domesti Conditioning | | Vel Vapor Extraction |
| | - L | . ŠE |] | | _ | • | |
| Was a chemica/becteriological sample submitted to Department? | | | | | | | |
| If yes, mo/day/yr sample was submitted Water Well Disinfected: Yes No | | | | | | | |
| E TYPE O | S EDIANK CA | CING HE | ED: | | | | |
| 5 TYPE OF BLANK CASING USED: 1 Steel 3 RIMP (SR) 5 Wrought 7 Fiberglass 9 Other (specify below) | | | | | | | |
| 2 PVC 4 ABC 6 Asbestos-Cement 8 Concrete Tile Blank casing diemeter 4 in. Was casing pulled? Yes x No If yes, how much 3 feet | | | | | | | |
| Blank ca | sing diamete | r4 | in. Was casing p | ulled? Yes x | No If yes, how m | uch 3 fe | eet |
| Casing h | eight above | or below k | and surface | in. | | | |
| 6 GROUT | PLUG MAT | ERIAL: | Nest cament 2 Cer | ment grout (3)Be | entonite 4 Othe | Y | |
| | | | | | | | |
| Grout P | ilug intervals | From | ft. to | ,,,, R, From | π, το | ft. From | π. τοπ. |
| What to | the nearest | source of | possible contamination: | | | | |
| 1 Sec | otic tenk | | 6 Seepage pit | (11)Fuel | storage | 16 Other (specify b | elaw) |
| 2 Sewer Mnes | | | 7 Pit privy | | lizer storage | | · |
| 3 Watertight sewer lines | | | 8 Sewage legoon | 13 inse | cticide storage | *************************************** | |
| 4 Lateral lines | | | 9 Feedyard | 9 Feedyard 14 Aband | | | |
| 5 Ce | ss Pool | | 10 Livestock pens | 15 Oil v | veil/ Gas well | | |
| Direction fro | om well? | | ***** | How many | r feet? | | |
| FROM | TO | CODE | | UGGING MATERIALS | | | |
| 0 | 3 | | Native fill | OGGING HOTTEL | | | |
| 3 | 32 | | | entonite chips | | | |
| . J | 92 | | | chomic omps | | | |
| | | | A | | | | |
| · | | | ** W | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed | | | | | | | |
| on (mo/day/yr) 12/10/14 and this record is true to the best of my knowledge and belief. Kansas | | | | | | | |
| - | | tractor's | License No. | | This Water Well | Record was completed | d on (mo/day/yr) |
| | 12/1 | 5/14 | under the busi | ness name of , / | Bluestem | Environmental Engineering, | |
| by | (signature) | | | Niv | ldfut | | |
| INST | RUCTIONS | : Please | fill in blanks and circ | cle the correct answ | ers. Send three cop | ies to Kansas Depart | ment of Health and |
| Envir | onment, Bu | reau of | Water, 1000 S W Jac Owner and retain on | ckson St., Ste. 420, | Topeka, Kansas 666 | 20-0001. Telephone: | 785-296-3565. |