

<b>1 LOCATION OF WATER WELL:</b> County: Gove	Fraction ¼ NE ¼ SE ¼ NE ¼	Section Number 31	Township Number T 11 S	Range Number 26 <input type="checkbox"/> E <input checked="" type="checkbox"/> W
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Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here <input type="checkbox"/> East side of Castle Rock Rd across from C-Mart #2506, Quinter	<b>Global Positioning Systems (GPS) information:</b> Latitude: _____ (in decimal degrees) Longitude: _____ (in decimal degrees) Elevation: _____ Horizontal Datum: <input type="checkbox"/> WGS84, <input type="checkbox"/> NAD83, <input type="checkbox"/> NAD27 Collection Method: _____  <input type="checkbox"/> GPS unit (Make/Model: _____) <input type="checkbox"/> Digital Map/Photo, <input type="checkbox"/> Topographic Map, <input type="checkbox"/> Land Survey Est. Accuracy: <input type="checkbox"/> < 3 m, <input type="checkbox"/> 3-5 m, <input type="checkbox"/> 5-15 m, <input type="checkbox"/> > 15 m
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<b>2 WATER WELL OWNER:</b> City of Quinter RR#, St. Address, Box #: 411 Main City, State ZIP Code: Quinter, KS 67752	
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<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> <u>80.04</u> ft. WELL'S STATIC WATER LEVEL <u>70.02</u> ft. WELL WAS USED AS: <table style="width: 100%;"> <tr> <td><input type="checkbox"/> Domestic</td> <td><input type="checkbox"/> Public Water Supply</td> <td><input type="checkbox"/> Dewatering</td> </tr> <tr> <td><input type="checkbox"/> Irrigation</td> <td><input type="checkbox"/> Oil Field Water Supply</td> <td><input checked="" type="checkbox"/> Monitoring MW-7</td> </tr> <tr> <td><input type="checkbox"/> Feedlot</td> <td><input type="checkbox"/> Domestic (Lawn &amp; Garden)</td> <td><input type="checkbox"/> Injection Well</td> </tr> <tr> <td><input type="checkbox"/> Industrial</td> <td><input type="checkbox"/> Air Conditioning</td> <td><input type="checkbox"/> Other _____</td> </tr> </table> Was a chemical/bacteriological sample submitted to Department? Yes <input type="checkbox"/> No <input type="checkbox"/>	<input type="checkbox"/> Domestic	<input type="checkbox"/> Public Water Supply	<input type="checkbox"/> Dewatering	<input type="checkbox"/> Irrigation	<input type="checkbox"/> Oil Field Water Supply	<input checked="" type="checkbox"/> Monitoring MW-7	<input type="checkbox"/> Feedlot	<input type="checkbox"/> Domestic (Lawn & Garden)	<input type="checkbox"/> Injection Well	<input type="checkbox"/> Industrial	<input type="checkbox"/> Air Conditioning	<input type="checkbox"/> Other _____
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**5 TYPE OF BLANK CASING USED:**

<input type="checkbox"/> Steel	<input type="checkbox"/> RMP (SR)	<input type="checkbox"/> Wrought	<input type="checkbox"/> Fiberglass	<input type="checkbox"/> Other (Specify below) _____
<input checked="" type="checkbox"/> PVC	<input type="checkbox"/> ABS	<input type="checkbox"/> Asbestos-Cement	<input type="checkbox"/> Concrete Tile	

Blank casing diameter 2 in. Was casing pulled? Yes  No  If yes, how much 3'  
 Casing height above or below land surface 36 in.

**6 GROUT PLUG MATERIAL:**  Neat cement  Cement grout  Bentonite  Other \_\_\_\_\_

Grout Plug Intervals: From 3 ft. to 80.04 ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

What is the nearest source of possible contamination:

<input type="checkbox"/> Septic tank	<input type="checkbox"/> Seepage pit	<input checked="" type="checkbox"/> Fuel storage	<input type="checkbox"/> Other (specify below) _____
<input type="checkbox"/> Sewer lines	<input type="checkbox"/> Pit privy	<input type="checkbox"/> Fertilizer storage	
<input type="checkbox"/> Watertight sewer lines	<input type="checkbox"/> Sewage lagoon	<input type="checkbox"/> Insecticide storage	
<input type="checkbox"/> Lateral lines	<input type="checkbox"/> Feedyard	<input type="checkbox"/> Abandoned water well	Direction from well? _____
<input type="checkbox"/> Cess pool	<input type="checkbox"/> Livestock pens	<input type="checkbox"/> Oil well/Gas well	How many feet? _____

FROM	TO	PLUGGING MATERIALS	FROM	TO	PLUGGING MATERIALS
0	3	Native soil			
3	80.04	Bentonite grout			

**7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:** This water well was plugged under my jurisdiction and was completed on (mo/day/year) 10/11/16 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 735. This Water Well Record was completed on (mo/day/year) 10/12/16 under the business name of MILCO Environmental Services, Inc. by (signature) Kathy J. Theallberger



# MILCO

**Environmental Services, Inc.**

320 West 4th Street  
Colby, KS 67701  
Tel: 785-460-1956  
Fax: 785-460-4220  
www.milcoinc.com

October 14, 2016

Kansas Department of Health and Environment  
Bureau of Water - GWTS  
1000 SW Jackson St, Ste 420  
Topeka, KS 66612-1367

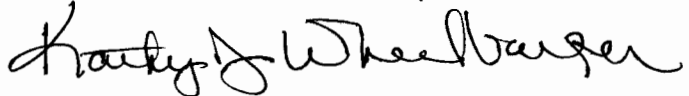
RE: Coastal Mart #2506, Quinter, Kansas  
KDHE Project Code U6-032-00693  
MILCO Project No. M269-P2-01

To Bureau of Water, Geology Section:

Enclosed, please find 7 Form WWC-5Ps for wells MW-1, MW-2, MW-7, MW-9, MW-11, VOBW-1, and VOBW-3 located at Coastal Mart #2506 in Quinter, Kansas.

If you have any questions or need additional information, please do not hesitate to contact us.

Respectfully submitted,  
**MILCO Environmental Services, Inc.**



Kathy Wheelbarger  
Office Assistant

Enclosures

RECEIVED

OCT 20 2016

BUREAU OF WATER