| , | WATER WEI | L PLUG | GING RECORD | Form WWC-5P | KSA 82a-1212 | ID No. | MW-10 | |
|---|----------------------------|-----------|---------------------------------------|---|---------------------------------------|---|--|--|
| 1 LOCAT | | | Fraction | ************** | Section Number | Township Number | | |
| County: | Loga | an | NW 1/4 S | W 1/4 NW 1/4 | 2 | 11S | 32W | |
| | and direction | from ne | erest town or city stre | et address of well if i | ocated within city? | | • | |
| 2 WATER | WELL OWNE | R; Oakle | ey Power Plant | | | | | |
| | Address, Box | | | | | of Agriculture, Division | n of Water Resources | |
| MARK V | e, ZIP Code WELL'S LOCA | TON W | | 400 | Applic | etion Number: | | |
| 3 "X" IN S | ECTION BOX | ; | DEPTH OF | WELL 128 | | | | |
| x | N | | f | WELL'S STATIC WATER LEVEL ft. | | | | |
| | | | WELL WAS | • | ****** | | | |
| X | NW | NE | | mestic 5 Pub | olic Water Supply | _9 Dewateri | ** | |
| w | | 1 | | | Field Water Supply | 10 Monitorin | | |
| " | 1 | · · | ~ ' | | m and Garden (domesti | c) 11 Injection | Well | |
| | | | 4 Ind | ustrial 8 Air | Conditioning | 12 Other | | |
| - | \$W | SE | | | ubmitted to Department | | No | |
| | 1 | 1 | If yes, mo/day/yr | betiimdus saw eigmas | | | | |
| - Innumu | 8 | | Water Well Disini | lected: Yes | No | | | |
| 5 TYPE O | F BLANK CA | | | + · · · · · · · · · · · · · · · · · · · | | | | |
| 1 Stee | | | | 7 Fiberglass | | pacify balow) | | |
| ②PVC | olen diemeter | 4 ABC | 5 Asbestos-C | Cement 8 Concrete | Tile | uch 3 f | | |
| | | | | | O II Yesh, IIOW III | uwi | | |
| Casing in | neight above o | r below k | Ind surface | in. | | | | |
| 6 GROUT | T PLUG MATE | RIAL: | Neat cement 2 Cer | ment grout (3)Be | entonite 4 Othe | ſ | | |
| | | | ft. to | t, From | ft. to | ft. From | ft. to ft. | |
| 1 Se | ptic tank | | 6 Seepage pt | (11)Fuel | storage | 16 Other (specify b | relaw) | |
| 2 Sewer lines | | | 7 Pit privy | | izer storage | | , | |
| 3 Watertight sewer lines | | | 8 Sewage legoon | 13 insec | ticide storage | *************************************** | ~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~ | |
| 4 Lateral lines | | | 9 Feedyard | | doned water well | | | |
| 5 Ce | es Pool | | 10 Livestock pens | 15 Oil w | ell/ Gas well 🗻 | | | |
| Direction fro | om well? | | | How many | feet? | | | |
| FROM | то | CODE | PU | JGGING MATERIALS | | | | |
| 0 | 128 | | Bentonite chips | | | | | |
| | | | | | | | | |
| *************************************** | | | | | | | | |
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| | | | | | ··· ··· · · · · · · · · · · · · · · · | | | |
| | | | | | | | | |
| CON | TRACTOR'S | OR LAN | DOWNER'S CERTIFIC | ATION: This water wel | i was plugged under m | y jurisdiction and was o | ompleted | |
| | no/day/yr) | | | | | est of my knowledge | | |
| Wate | er Well Contr | | icense No. | | This Water Well ! | Record was completed | i on (mo/day/yr) | |
| | 12/11 | 1/15 | under the busi | ness name of // | Bluestem | Environmental Engineering, | inc. | |
| by (| (signa ture) | | | Nick | Lat | ************************ | | |
| INST | RUCTIONS: | Please | fill in blanks and circ | le the correct answe | ers. Send three copi | es to Kansas Departi | ment of Health and | |
| Enviro | onment, Bur | eau of V | Vater, 1000 S W Jac | kson St., Ste. 420, 1 | opeka, Kansas 666: | 20-0001. Telephone: | 785-296-3565. | |
| oeng | OUR IO MARIE | AAGII (| Owner and retain one | tor your records. | | | | |