

WATER WELL PLUGGING RECORD Form WWC-5P

KSA 82a-1212

ID NO.

FSIP-1-7-12

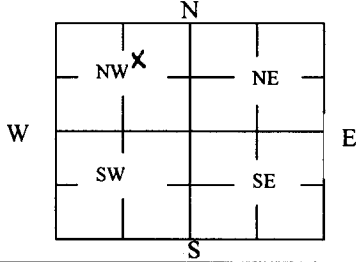
1 LOCATION OF WATER WELL: County: Saline	Fraction NE ¼ SW ¼ NE ¼ NW ¼	Section Number 16	Township Number T 14 S	Range Number 2 <input type="checkbox"/> E <input checked="" type="checkbox"/> W
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Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here 3256 East Country Club Road
Salina, KS 67401

Global Positioning Systems (GPS) information:
 Latitude: 97.5594 (in decimal degrees)
 Longitude: 38.8392 (in decimal degrees)
 Elevation: 1224.2
 Datum: WGS84, NAD83, NAD27
Collection Method:
 GPS unit (Make/Model: _____)
 Digital Map/Photo, Topographic Map, Land Survey
 Est. Accuracy: < 3 m, 3-5 m, 5-15 m, > 15 m

2 WATER WELL OWNER: Exline Leasing, Inc.
 RR#, St. Address, Box #:
 City, State ZIP Code:

3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:



4 DEPTH OF WELL 12 ft.
 WELL'S STATIC WATER LEVEL NA ft.

WELL WAS USED AS:

- Domestic
- Irrigation
- Feedlot
- Industrial
- Public Water Supply
- Oil Field Water Supply
- Domestic (Lawn & Garden)
- Air Conditioning
- Dewatering
- Monitoring
- Injection Well
- Other Injection Pt

Was a chemical/bacteriological sample submitted to Department? Yes No

5 TYPE OF BLANK CASING USED:

- Steel
- RMP (SR)
- Wrought
- Fiberglass
- PVC
- ABS
- Asbestos-Cement
- Concrete Tile
- Other (Specify below) _____

Blank casing diameter 1 in. Was casing pulled? Yes No If yes, how much _____
 Casing height above or below land surface 30 in.

6 GROUT PLUG MATERIAL: Neat cement Cement grout Bentonite Other _____

Grout Plug Intervals: From 0 ft. to 12 ft., From _____ ft. to _____ ft., From _____ to _____ ft.

What is the nearest source of possible contamination:

- Septic tank
 - Sewer lines
 - Watertight sewer lines
 - Lateral lines
 - Cess pool
 - Seepage pit
 - Pit privy
 - Sewage lagoon
 - Feedyard
 - Livestock pens
 - Fuel Storage
 - Fertilizer storage
 - Insecticide storage
 - Abandoned water well
 - Oil well/Gas well
 - Other (specify below)
Chromium contamination at the site.
- Direction from well? _____
 How many feet? _____

FROM	TO	PLUGGING MATERIALS	FROM	TO	PLUGGING MATERIALS
0	12	Bentonite			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 4/25/14 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 709. This Water Well Record was completed on (mo/day/year) 6/30/14 under the business name of Plains Environmental Services, Inc. by (signature) *[Signature]*

INSTRUCTIONS: Use typewriter or ballpoint pen. Please press firmly and print clearly. Please fill in blanks, underline or circle the correct answers. Send one copy to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Ste. 420, Topeka, Kansas 66612-1367. Telephone: 785/296-5524. Send one to Water Well Owner and retain one for your records. Visit us at <http://www.kdheks.gov/waterwell/index.html>.