|  |  |                                       | WATER WELL PLUGGING R  | RECORD Form WWC-5P   | KSA 82a-1212 ID N           | VO                  |
|--|--|---------------------------------------|--|--|-----------------------------|---------------------|
| 1 LOCA   | 1 LOCATION OF WATER WELL:              |                                       | Fraction   | Section Number   | Township Number             | Range Number        |
|  |  | 5W of SW                              | 3  | 15   | 42 FAW                      |                     |
| County: Wallace.  Distance and direction from nearest town or or   |  |                                       | 1/4 1/4 1/4  |  | 75                          | / Z E/W             |
| Distance and   | direction from r                       | nearest town or d                     | ity street address of well if loc  | ated within city?  |                             |                     |
| 2 WATE   | R WELL OWNE                            | R: Purvi                              | on horse Rd  |  |                             |                     |
|  | St. Address, Box                       | #: 210 Ir                             | on horse Rd  | Board of Agriculture   | e, Division of Water Resour | ces                 |
| City, St   | ate, ZIP Code                          | : Wesk                                | An KS 6162 Application Number: 22874   |  |                             |                     |
| 3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:  4 DEPTH OF WELL  |  |                                       |  |  |                             |                     |
| N N  |  |                                       |  |  |                             |                     |
|  |  |                                       | WELL WAS USED AS:  |  |                             |                     |
| N  | N +                                    | - NE                                  | 1 Domestic   | <ul><li>5 Public Water Supply</li><li>6 Oil Field Water Supp</li></ul> |                             |                     |
|  |  |                                       | 2 Irrigation<br>3 Feedlot  | 7 Domestic (Lawn & G   |                             | •                   |
| W  |  | E                                     | 4 Industrial   | 8 Air Conditioning   |                             |                     |
| SW SE Was a chemical / bacteriological sample submitted to Department? Yes   |  |                                       |  |  |                             |                     |
|  | if yes, mo/day/yr sample was submitted |                                       |  |  |                             |                     |
| Water Well Disinfected: YesX No  |  |                                       |  |  |                             |                     |
| S  |  |                                       |  |  |                             |                     |
| 5 TYPE OF BLANK CASING USED:   |  |                                       |  |  |                             |                     |
| Steel) 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (Specify below)   |  |                                       |  |  |                             |                     |
| 2 PVC 4 ABS 6 Asbestos-Cement 8 Concrete Tile  |  |                                       |  |  |                             |                     |
| Blank<br>Casin   | casing diamete<br>g height above       | or                                    | Was casing pulled?   | Yes No 2.  | X If yes, how mu            | uch                 |
| 6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other  |  |                                       |  |  |                             |                     |
| Grout  | Plug Intervals:                        | <b>3</b> From,                        | 196 ft. to 200 ft.   | ., 3 From5ft. to   | o3 ft., From                | to ft               |
| What is the nearest source of possible contamination:  |  |                                       |  |  |                             |                     |
| 1 Septic tank  |  |                                       | 6 Seepage pit  | 11 Fuel storage  | 16 Other (spe               | • '                 |
| 2 Sewer lines<br>3 Watertight sewer lines  |  |                                       | 7 Pit privy<br>8 Sewage lagoon   | <ul><li>12 Fertilizer storage</li><li>13 Insecticide storage</li></ul> |                             |                     |
| 4 Lateral lines  |  |                                       | 9 Feedyard 14 Abandoned water  |  | well                        |                     |
| 5 Cess pool  |  |                                       | 10 Livestock pens  | 15 Oil well/Gas well<br>/ feet? 400                                    |                             |                     |
| Direction from well? <u>Eqs.</u> How many feet? <u>4000</u>  |  |                                       |  |  |                             |                     |
| FROM TO P  |  | UGGING MATERIALS                      |  |  |                             |                     |
| 250  | 200                                    | River                                 | sand   |  |                             |                     |
| 200  | 196                                    | Clay                                  |  |  |                             |                     |
|  | 5                                      | 5. 4                                  | - : 1  |  |                             |                     |
| 196  |  | Sub.                                  | 501/   |  |                             |                     |
| 5  | 3                                      | clay                                  |  |  |                             |                     |
| 3  | 0                                      | Top                                   | Soil   |  |                             |                     |
|  |  |                                       |  |  |                             |                     |
|  |  |                                       |  |  |                             |                     |
| CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No.  Land Owner This Water Well Record was completed on (mo/day/year) under the business name of Land Owner This Water Well Record was completed on (mo/day/year) |  |                                       |  |  |                             |                     |
| by (signature) by (signature)  |  |                                       |  |  |                             |                     |
|  |  | · · · · · · · · · · · · · · · · · · · |  |  |                             |                     |
| answers. S   | end top three                          | copies to Kans                        | point pen. <u>Please press fir</u><br>cas Department of Health a<br>367. Telephone: 785/296-55 | and Environment, Bureau o  | of Water, Geology Section   | on, 1000 SW Jackson |