ID NO. 00056119 WATER WELL PLUGGING RECORD Form WWC-5P KSA 82a-1212 LOCATION OF WATER WELL: Number Fraction Section Number Township Number Rance County: Wichita SE'SE "NE "SE E(W) Distance and direction from nearest town or city street address of well if located within city? 120th Rd Marienthal. WATER WELLOWNER: Scott Cooperative Association 2 RR #, St. Address, Box #: P.O. Box 340 Board of Agriculture, Division of Water Resources City, State, ZIP Code : Scott City, KS 6787 Application Number: DEPTH OF WELL 150 ft. 3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX: WELL'S STATIC WATER LEVEL 129. ft. WELL WAS USED AS: 1 Domestic 5 Public Water Supply 9 Dewatering NF 6 Oil Field Water Supply 10 Monitoring Well 2 Irrigation 3 Feedlot 7 Domestic (Lawn & Garden) 11 Injection Well W E 8 Air Conditioning 12 Other ..... 4 Industrial Was a chemical / bacteriological sample submitted to Department? Yes ....... No ....X..... SW SE If yes, mo/day/yr sample was submitted ..... Water Well Disinfected: Yes .......... No ...X.... TYPE OF BLANK CASING USED: 5 3 RMP (SR) Steel 5 Wrought 7 Fiberglass 9 Other (Specify below) 2 PVC 4 ABS 6 Asbestos-Cement 8 Concrete Tile ..... in. If yes, how much ... Yes ..... 3 Bentonite GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 6 From .150 ft. Grout Plug Intervals: to ..... ft., From ..... What is the nearest source of possible contamination: 1 Septic tank 11) Fuel storage 6 Seepage pit 16 Other (specify below) 2 Sewer lines 7 Pit privy 12 Fertilizer storage 13 Insecticide storage 3 Watertight sewer lines 8 Sewage lagoon 14 Abandoned water well 4 Lateral lines 9 Feedyard 5 Cess pool 10 Livestock pens 15 Oil well/Gas well Direction from well? ...... How many feet? ..... **FROM** TO PLUGGING MATERIALS 

INSTRUCTIONS: Use typewriter or ball point pen. <u>Please press firmly</u> and <u>print</u> clearly. Please fill in blanks, underline or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson

Water Well Contractor's License No.

This Water Well Record was completed on (mo/day/year)

To get Pecson

by (signature)