

Plugging Horizontals

1	LOCATION OF WATER WELL:	Fraction	Section	Number	Township	Number	Range	Number
	County: <u>Barton</u>	<u>SE 1/4 SE 1/4 NE 1/4</u>	<u>29</u>		<u>19S</u>		<u>13W</u>	

Distance and direction from nearest town or city street address of well if located within city?
1701 N. Washington, Great Bend KS

2	WATER WELL OWNER: <u>KD&B Time 3 Materials</u>	Board of Agriculture, Division of Water Resources
	RR #, St. Address, Box #: <u>Kansas Oil Co.</u>	Application Number: _____
	City, State, ZIP Code: <u>116-005-00136</u>	

3	MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4	DEPTH OF WELL ft
N W E S E		WELL'S STATIC WATER LEVEL ft.	
		WELL WAS USED AS:	
		1 Domestic 5 Public Water Supply 9 Dewatering	
		2 Irrigation 6 Oil Field Water Supply 10 Monitoring Well	
		3 Feedlot 7 Domestic (Lawn & Garden) 11 Injection Well	
		4 Industrial 8 Air Conditioning 12 Other	
Was a chemical / bacteriological sample submitted to Department? Yes No			
If yes, mo/day/yr sample was submitted			
Water Well Disinfected: Yes No			

5	TYPE OF BLANK CASING USED:
1 Steel 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (Specify below)	
2 PVC 4 ABS 6 Asbestos-Cement 8 Concrete Tile	
Blank casing diameter in. Was casing pulled? Yes No If yes, how much	
Casing height above or below land surface in.	

6	GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other			
Grout Plug Intervals: From ft. to ft., From ft. to ft., From to ft.				
What is the nearest source of possible contamination:				
1 Septic tank 6 Seepage pit 11 Fuel storage 16 Other (specify below)				
2 Sewer lines 7 Pit privy 12 Fertilizer storage				
3 Watertight sewer lines 8 Sewage lagoon 13 Insecticide storage				
4 Lateral lines 9 Feedyard 14 Abandoned water well				
5 Cess Pool 10 Livestock pens 15 Oil well/Gas well				
Direction from well? How many feet?				

FROM	TO	PLUGGING MATERIALS

All horizontal SVE piping to SVE wells and the 3" diameter water discharge piping was plugged by using a neat cement / bentonite slurry.

7	CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) <u>5/6/02</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>585</u> This Water Well Record was completed on (mo/day/year) <u>5/21/02</u> under the business name of <u>K&B</u>
	by (signature) <u>[Signature]</u>

INSTRUCTIONS: Use typewriter or ball point pen. Please press firmly and print 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, Topeka, Kansas 66620-0001. Telephone: 785/296-3565. Send one to Water Well Owner and retain one for your records.