W	<u>ATER V</u>	ELL PL	UGGING I	RECORD	Form WV	VC-5P	KSA 8	2a-1212 ID NO.		
1	LOCATION County:	ON OF WAT McPhersor	TER WELL:	Fraction 1/4 SE	1/4 NE 1/4 SE	Sectio	n Number 5	Township Number	3 DE 171W	
	Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here								mation:(in decimal degrees)(in decimal degrees)	
No	orth of Frontier Rd. on 14th Ave., McPherson						Datum: WGS84, NAD83, NAD27 Collection Method:			
2	WATER WELL OWNER: Coastal Refining Corp. RR#, St. Address, Box #: 2830 Tremont Road City, State ZIP Code: Savannah, GA 31405						GPS unit (Make/Model: □ Digital Map/Photo, □ Topographic Map, □ Land Survey Est. Accuracy: □ < 3 m, □ 3-5 m, □ 5-15 m, □ > 15 m			
3	MARK WELL'S LOCATION WITH AN "X" IN SECTION 4 DEPTH OF WELL 95 ft.									
.at	BOX: WELL'S STATIC WATER LEVEL 91.9 ft									
	WELL WAS USED AS:									
w	NW SW	-	NE E	Irrig Feed Indu	strial	Oil Fie Domest Air Cor	nditioning	ppply Mon C Garden) Injection Other	atering itoring ction Well or	
	Was a chemical/bacteriological sample submitted to Department? Yes No 🗸									
5	5 TYPE OF BLANK CASING USED:									
	Steel RMP (SR) Wrought Fiberglass Concrete Tile									
Blank casing diameter 2 in. Was casing pulled? Yes No I If yes, how much 3' bgs Casing height above or below land surface in.										
6	6 GROUT PLUG MATERIAL: Neat cement									
	Watertight sewer lines Sewage lagoon Insecticide storage Lateral lines Feedyard Abandoned water well Direction from well? N/A Cess pool Livestock pens Oil well/Gas well How many feet?									
	FROM 0	TO 3	PLUG Native soil	GING MATE	RIALS	FROM	ТО	PLUGGING	MATERIALS	
	3	95	Bentonite		-		-			
				,	:			C-5		
								NCRA Plugged	\	
							-			
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 8/29/2011 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 527 . This Water Well Record was completed on (mo/day/year) 9/8/2011 under the business name of GeoCore Inc. by (signature)										
INSTRUCTIONS: Use typewriter or ballpoint 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, 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.										
	Check one: White Copy Blue Copy Pink Copy									