					WATER WELL PLUGGING R	ECORD F	orm WWC-5P	KSA 82a-1212 ID	NO	
1	LOCAT	TION OF WATI	ER WELL:		Fraction	Section	Number	Township Number	Range	Number
County: Finney					NE¼ SE ¼ NE ¼	L	22	23S	34	E E
Dis	stance and				ity street address of well if loc		•			
H	<u>lolcomb</u>	: Nat E	Big Lowe	Rd	2 W7/10 N and	l W into-	-			
2	WATER WELL OWNER:		OXY USA, Inc. Sequoyah Morrow Unit Box 2528							
	RR #, St. Address, Box #: City, State, ZIP Code :			Liberal, KS 67905-2528 Board of Agriculture, Division of Water Resources Application Number: 20030203						
3 W	AN "X"  NV  TYPE 0  1_Stee	V S OF BLANK CA	BOX:  NE  NE  SING USED: P (SR) 5		WELL'S STATIC WATE WELL WAS USED AS:  1 Domestic 2 Irrigation 3 Feedlot 4 Industrial  Was a chemical / bacteriolo If yes, mo/day/yr sample was Water Well Disinfected: Yes	5 Public 6 Oil Fid Dome 8 Air Congical sample sas submitted	.1.39 ft.  : Water Supply eld Water Supply estic (Lawn & Gonditioning submitted to December 1)	elow)  10 Monitor 11 Injection 12 Other  2 Partment? Yes	ing Well  n Well  Nox.	
	Blank Casing	casing diamete	er6 ir	١.	estos-Cement 8 Concre  Was casing pulled? face48	Yes in.		X If yes, how m	uch	
6	Grout F	T PLUG MATE	From		at cement 2 ement gro 320. ft. to5 ft.			Other ft., From		1
	1 S 2 S 3 W 4 L 5 C	eptic tank ewer lines /atertight sewe ateral lines ess pool	er lines		contamination:  6 Seepage pit 7 Pit privy 8 Sewage lagoon 9 Feedyard 10 Livestock pens	12 Fert 13 Inse 14 Aba 15 Oil v	storage ilizer storage cticide storage ndoned water v vell/Gas well	well	ecify below)	
	FROM	TO PLUGGING MATERIA  5 Cement Grout			JGGING MATERIALS					
	320				rout					
	5	Surface	Backfi							

CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 01-15-25 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. KWWCL-430 This Water Well Record was completed on (mo/day/year) 01-15-25 under the business name of Howard Drilling Co. Box 806 Beaver, OK 73932 by (signature)

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 St., Ste. 420, Topeka, Kansas 66612-1367. Telephone: 785/296-5522. Send one to Water Well Owner and retain one for your records.

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