

WATER WELL PLUGGING RECORD

Form WWC-5P

KSA 82a-1212

ID No. 0043648

1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: Harvey	NW 1/4 SW 1/4 SW 1/4	34	24	01 W

Distance and direction from nearest town or city street address of well if located within city?

Approximately 30 ft. N of 4th St. & West of Franklin Avenue

2 WATER WELL OWNER: El Paso Corporation	Board of Agriculture, Division of Water Resources
RR#, St. Address, Box # 1001 Louisiana St. Rm N528A	Application Number:
City, State, ZIP Code : Houston TX 77002	

3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4 DEPTH OF WELL 25.5 ft.				
<div style="text-align: center;">N</div> <table border="1" style="width: 100%;"> <tr> <td style="width: 50%;">NW</td> <td style="width: 50%;">NE</td> </tr> <tr> <td style="width: 50%;">SW</td> <td style="width: 50%;">SE</td> </tr> </table> <div style="text-align: center;">S</div> <div style="position: relative; height: 150px;"> <div style="position: absolute; left: 0; top: 0; width: 100%; height: 100%; border: 1px solid black; display: flex; align-items: center; justify-content: center;"> X </div> </div>	NW	NE	SW	SE	WELL'S STATIC WATER LEVEL 21.47 ft. WELL WAS USED AS: <div style="display: flex; justify-content: space-between;"> <div> 1 Domestic 2 Irrigation 3 Feedlot 4 Industrial </div> <div> 5 Public Water Supply 6 Oil Field Water Supply 7 Lawn and Garden (domestic) 8 Air Conditioning </div> <div> 9 Dewatering 10 Monitoring Well 11 Injection Well 12 Other </div> </div>
NW	NE				
SW	SE				
Was a chemical/bacteriological sample submitted to Department? Yes _____ No X If yes, mo/day/yr sample was submitted _____ Water Well Disinfected: Yes _____ No X					

5 TYPE OF BLANK CASING USED:
<div style="display: flex; justify-content: space-between;"> <div> 1 Steel 2 PVC </div> <div> 3 RMP (SR) 4 ABC </div> <div> 5 Wrought 6 Asbestos-Cement </div> <div> 7 Fiberglass 8 Concrete Tile </div> <div> 9 Other (specify below) </div> </div>
Blank casing diameter 2 in. Was casing pulled? Yes _____ No X If yes, how much _____
Casing height above or below land surface 240 in. Overdrilled 20 ft.

6 GROUT PLUG MATERIAL:
<div style="display: flex; justify-content: space-between;"> <div>1 Neat cement</div> <div>2 Cement grout</div> <div>3 Bentonite</div> <div>4 Other</div> </div>
Grout Plug Intervals From 0.5 ft. to 25.5 ft. From _____ ft. to _____ ft. From _____ ft. 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	CODE	PLUGGING MATERIALS
0	0.5		Soil
0.5	25.5		Bentonite

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/yr) 12/18/02 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 531 This Water Well Record was completed on (mo/day/yr) _____ by (signature) <i>Alison M. [Signature]</i> under the business name of Geotechnical Services, Inc.

INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment, Bureau of Water, 1000 S W Jackson St., Ste. 420, Topeka, Kansas 66620-0001. Telephone: 785-296-3565. Send one to Water Well Owner and retain one for your records.