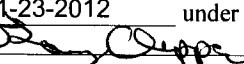


WATER WELL PLUGGING RECORD

Form WWC-5P

KSA 82a-1212

ID NO. 4887 & 10639

1 LOCATION OF WATER WELL:		Fraction County: GRAY 1/4 NW 1/4 SW 1/4 SE 1/4	Section Number 24	Township Number T 24 S	Range Number 29 <input type="checkbox"/> E <input checked="" type="checkbox"/> W																																										
Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here <input type="checkbox"/> Approx. 9 miles North of Ingalls Kansas		Global Positioning Systems (GPS) information: Latitude: 37.94653 N (in decimal degrees) Longitude: 100.45517 W (in decimal degrees) Elevation: Datum: <input type="checkbox"/> WGS84, <input type="checkbox"/> NAD83, <input checked="" type="checkbox"/> NAD27 Collection Method: <input type="checkbox"/> GPS unit (Make/Model: Magellan Triton) <input type="checkbox"/> Digital Map/Photo, <input type="checkbox"/> Topographic Map, <input type="checkbox"/> Land Survey Est. Accuracy: <input type="checkbox"/> < 3 m, <input type="checkbox"/> 3-5 m, <input type="checkbox"/> 5-15 m, <input type="checkbox"/> > 15 m																																													
2 WATER WELL OWNER: Midwest Feeders Inc. RR#, St. Address, Box #: 05013 13 RD City, State ZIP Code: Ingalls KS 67853																																															
3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF WELL 253 ft. WELL'S STATIC WATER LEVEL 145 ft WELL WAS USED AS: <table> <tr> <td><input type="checkbox"/> Domestic</td> <td><input type="checkbox"/> Public Water Supply</td> <td><input type="checkbox"/> Dewatering</td> </tr> <tr> <td><input checked="" type="checkbox"/> Irrigation</td> <td><input type="checkbox"/> Oil Field Water Supply</td> <td><input type="checkbox"/> Monitoring</td> </tr> <tr> <td><input type="checkbox"/> Feedlot</td> <td><input type="checkbox"/> Domestic (Lawn & Garden)</td> <td><input type="checkbox"/> Injection Well</td> </tr> <tr> <td><input type="checkbox"/> Industrial</td> <td><input type="checkbox"/> Air Conditioning</td> <td><input type="checkbox"/> Other _____</td> </tr> </table> Was a chemical/bacteriological sample submitted to Department? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>				<input type="checkbox"/> Domestic	<input type="checkbox"/> Public Water Supply	<input type="checkbox"/> Dewatering	<input checked="" type="checkbox"/> Irrigation	<input type="checkbox"/> Oil Field Water Supply	<input type="checkbox"/> Monitoring	<input type="checkbox"/> Feedlot	<input type="checkbox"/> Domestic (Lawn & Garden)	<input type="checkbox"/> Injection Well	<input type="checkbox"/> Industrial	<input type="checkbox"/> Air Conditioning	<input type="checkbox"/> Other _____																														
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5 TYPE OF BLANK CASING USED:																																															
<input checked="" type="checkbox"/> Steel <input type="checkbox"/> RMP (SR) <input type="checkbox"/> Wrought <input type="checkbox"/> Fiberglass <input type="checkbox"/> Other (Specify below) <input type="checkbox"/> PVC <input checked="" type="checkbox"/> ABS <input type="checkbox"/> Asbestos-Cement <input type="checkbox"/> Concrete Tile _____																																															
Blank casing diameter 16 in. Was casing pulled? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> If yes, how much 72 Inches																																															
Casing height above or below land surface 72 Below in.																																															
6 GROUT PLUG MATERIAL: <input type="checkbox"/> Neat cement <input checked="" type="checkbox"/> Cement grout <input type="checkbox"/> Bentonite <input type="checkbox"/> Other _____																																															
Grout Plug Intervals: From 6 ft. to 10 ft., From _____ ft. to _____ ft., From _____ to _____ ft.																																															
What is the nearest source of possible contamination:																																															
<input type="checkbox"/> Septic tank <input type="checkbox"/> Sewer lines <input type="checkbox"/> Watertight sewer lines <input type="checkbox"/> Lateral lines <input type="checkbox"/> Cess pool		<input type="checkbox"/> Seepage pit <input type="checkbox"/> Pit privy <input type="checkbox"/> Sewage lagoon <input type="checkbox"/> Feedyard <input checked="" type="checkbox"/> Livestock pens		<input type="checkbox"/> Fuel Storage <input type="checkbox"/> Fertilizer storage <input type="checkbox"/> Insecticide storage <input type="checkbox"/> Abandoned water well <input type="checkbox"/> Oil well/Gas well																																											
Direction from well? EAST How many feet? 200																																															
<table border="1"> <thead> <tr> <th>FROM</th> <th>TO</th> <th>PLUGGING MATERIALS</th> <th>FROM</th> <th>TO</th> <th>PLUGGING MATERIALS</th> </tr> </thead> <tbody> <tr> <td>253'</td> <td>145'</td> <td>Chlorinated Road Sand</td> <td>145'</td> <td>10'</td> <td>Dirty Oversized Rock W/Clay chunks</td> </tr> <tr> <td>10'</td> <td>6'</td> <td>3,000 PSI Concrete</td> <td>6'</td> <td>0'</td> <td>Dug down, cut off casing, backfill</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>						FROM	TO	PLUGGING MATERIALS	FROM	TO	PLUGGING MATERIALS	253'	145'	Chlorinated Road Sand	145'	10'	Dirty Oversized Rock W/Clay chunks	10'	6'	3,000 PSI Concrete	6'	0'	Dug down, cut off casing, backfill																								
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7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 1-13-2012 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 145. This Water Well Record was completed on (mo/day/year) 1-23-2012 under the business name of Hydro Resources Mid Continent by (signature) Gary Clepper 																																															
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: <input type="checkbox"/> White Copy <input type="checkbox"/> Blue Copy <input type="checkbox"/> Pink Copy																																															