

WATER WELL PLUGGING RECORD Form WWC-5P KSA 82a-1212 ID NO.

MW14

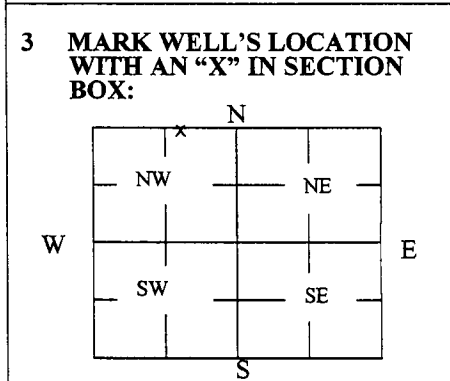
| | | | | |
|--|------------------------------|----------------------|---------------------------|---|
| 1 LOCATION OF WATER WELL: County: KEARNY | Fraction NW ¼ NE ¼ NW ¼ ¼ | Section Number 27 | Township Number T 24 S | Range Number 36 <input type="checkbox"/> E <input checked="" type="checkbox"/> W |
|--|------------------------------|----------------------|---------------------------|---|

Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here 702 N. CAMPBELL ST. LAKIN, KS

Global Positioning Systems (GPS) information:
 Latitude: 37.9453201 (in decimal degrees)
 Longitude: -101.26166 (in decimal degrees)
 Elevation: 3013.16
 Horizontal Datum: WGS84, NAD83, NAD27
 Collection Method:

2 WATER WELL OWNER: MARGARET SPELLMAN
 RR#, St. Address, Box #: 4821 MIXICO GRAVEL RD.
 City, State ZIP Code: COLUMBIA, MO 65202

GPS unit (Make/Model: _____)
 Digital Map/Photo, Topographic Map, Land Survey
 Est. Accuracy: < 3 m, 3-5 m, 5-15 m, > 15 m



4 DEPTH OF WELL 35.00 ft.
WELL'S STATIC WATER LEVEL 24.39 ft.
WELL WAS USED AS:

| | | |
|-------------------------------------|---|--|
| <input type="checkbox"/> Domestic | <input type="checkbox"/> Public Water Supply | <input type="checkbox"/> Dewatering |
| <input type="checkbox"/> Irrigation | <input type="checkbox"/> Oil Field Water Supply | <input checked="" 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 _____ |

Was a chemical/bacteriological sample submitted to Department? Yes No

5 TYPE OF BLANK CASING USED:

| | | | | |
|---|-----------------------------------|--|--|--|
| <input type="checkbox"/> Steel | <input type="checkbox"/> RMP (SR) | <input type="checkbox"/> Wrought | <input type="checkbox"/> Fiberglass | <input type="checkbox"/> Other (Specify below) |
| <input checked="" type="checkbox"/> PVC | <input type="checkbox"/> ABS | <input type="checkbox"/> Asbestos-Cement | <input type="checkbox"/> Concrete Tile | |

Blank casing diameter 2 in. Was casing pulled? Yes No If yes, how much 3'
 Casing height above or below land surface _____ in.

6 GROUT PLUG MATERIAL: Neat cement Cement grout Bentonite Other CONCRETE 0-1'

Grout Plug Intervals: From 0 ft. to 1 ft., From 1 ft. to 35 ft., From _____ ft. to _____ ft.

What is the nearest source of possible contamination:

| | | | |
|---|---|--|--|
| <input type="checkbox"/> Septic tank | <input type="checkbox"/> Seepage pit | <input checked="" type="checkbox"/> Fuel storage | <input type="checkbox"/> Other (specify below) |
| <input type="checkbox"/> Sewer lines | <input type="checkbox"/> Pit privy | <input type="checkbox"/> Fertilizer storage | |
| <input type="checkbox"/> Watertight sewer lines | <input type="checkbox"/> Sewage lagoon | <input type="checkbox"/> Insecticide storage | |
| <input type="checkbox"/> Lateral lines | <input type="checkbox"/> Feedyard | <input type="checkbox"/> Abandoned water well | Direction from well? _____ |
| <input type="checkbox"/> Cess pool | <input type="checkbox"/> Livestock pens | <input type="checkbox"/> Oil well/Gas well | How many feet? _____ |

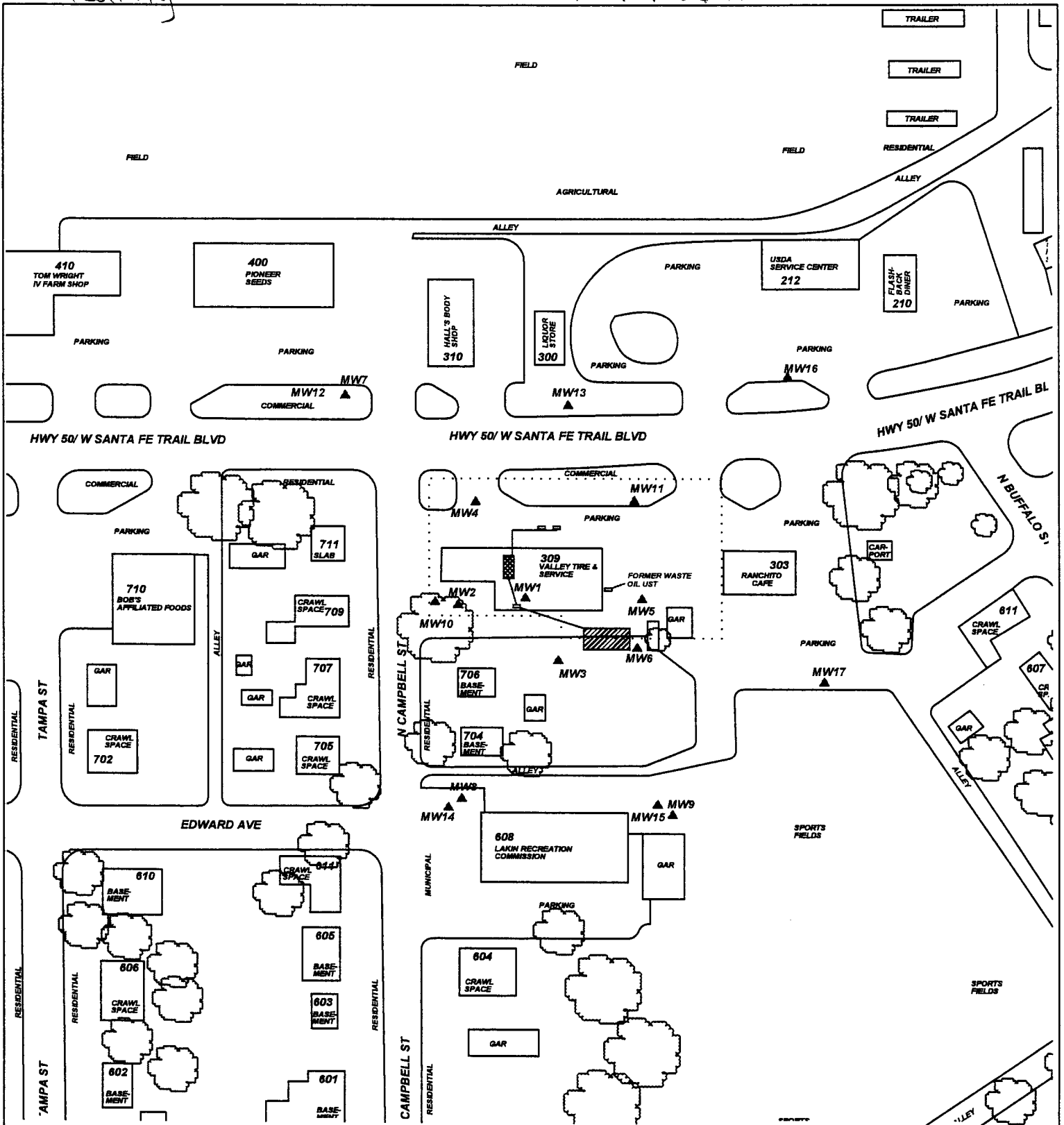
| FROM | TO | PLUGGING MATERIALS | FROM | TO | PLUGGING MATERIALS |
|------|----|--------------------|------|----|--------------------|
| 0 | 1 | CONCRETE | | | |
| 1 | 35 | BENTONITE | | | |
| | | | | | |
| | | | | | |
| | | | | | |

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 6/1/20 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 585. This Water Well Record was completed on (mo/day/year) 6/12/20 under the business name of ASSOCIATED ENVIRONMENTAL INC by (signature) *[Signature]*

Send one white copy to Kansas Department of Health & Environment, Geology Section, 1000 SW Jackson Street, Ste. 420, Topeka, KS 66612-1367. Send one copy to WATER WELL OWNER and retain one for your records.
 Visit us at <http://www.kdheks.gov/waterwell/index.htm> Telephone 785-296-5524.

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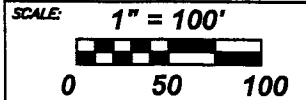


PROJECT: LAKIN 66 COMPANY
ADDRESS: HWY 50 & CAMPBELL
LOCATION: LAKIN, KANSAS
DRAWN BY: B. STALNAKER **DATE:** 10/1/19
REVISED BY: C. ROE **DATE:** 3/16/20
AEI JOB #: TF222 **KDHE JOB #:** A1-047-40024

TITLE:

ASSOCIATED ENVIRONMENTAL INC.

LEGEND:
 = FORMER (2) 2,000 G. UST BASIN & PUMP ISLANDS
 = FORMER (1) 4,000 G., (1) 9,000 G., & (2) 12,000 G. ASTS
 = MONITORING WELL
 = PLUGGED/DESTROYED WELL
..... = SUBJECT PROPERTY



NOTES: