| $\mathbf{W}_{A}$                                                                                                                                                                                                                                                              | ATER WELL PLUGGING REC                                                                                               | CORD Form WWC           | -5P KSA 82a                  | a-1212 ID NO.       | 20090154                                |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------|-------------------------|------------------------------|---------------------|-----------------------------------------|--|
| 1                                                                                                                                                                                                                                                                             | LOCATION OF WATER WELL:                                                                                              | Fraction                | Section Number               | Township Number     |                                         |  |
|                                                                                                                                                                                                                                                                               | County: Ford Distance and direction from nearest tow                                                                 | SW 1/4 NE 1/4 SW 1/2    | vell if located within       | 25 city?            | 21 XEXW                                 |  |
|                                                                                                                                                                                                                                                                               |                                                                                                                      |                         |                              |                     |                                         |  |
| 2                                                                                                                                                                                                                                                                             | 3 3/4 east of Bellefont WATER WELL OWNER: Hartman Oil Global Positioning Systems (decimal degrees, min. of 4 digits  |                         |                              |                     |                                         |  |
| 2 WATER WELL OWNER: Hartman Oil Global Positioning Systems (decimal degree 4550 W 9 Mile Road Latitude:                                                                                                                                                                       |                                                                                                                      |                         |                              |                     |                                         |  |
|                                                                                                                                                                                                                                                                               | RR#, St. Address, Box #: Garden City, Ks. 67846 City, State ZIP Code:                                                |                         | Longitude: Elevation: Datum: |                     |                                         |  |
|                                                                                                                                                                                                                                                                               |                                                                                                                      |                         |                              |                     |                                         |  |
|                                                                                                                                                                                                                                                                               | 0.13, 2.11. 2000.                                                                                                    | Data Collection Method: |                              |                     |                                         |  |
| 3                                                                                                                                                                                                                                                                             | MARK WELL'S LOCATION 4 DEPTH OF WELL 140 ft.                                                                         |                         |                              |                     |                                         |  |
| WITH AN "X" IN SECTION WELL'S STATIC WATER LEVEL                                                                                                                                                                                                                              |                                                                                                                      |                         |                              |                     |                                         |  |
|                                                                                                                                                                                                                                                                               | BOX: WELL'S STATIC WATER LEVEL 40 ft                                                                                 |                         |                              |                     |                                         |  |
|                                                                                                                                                                                                                                                                               |                                                                                                                      | WELL WAS USED AS:       |                              |                     |                                         |  |
|                                                                                                                                                                                                                                                                               | NW NE                                                                                                                | 1 Domestic              | 5 Public Water Sup           | nnly 0 Day          | watering                                |  |
|                                                                                                                                                                                                                                                                               |                                                                                                                      | 2 Irrigation            | 6 Oil Field Water            | Supply 10 Mo        | onitoring                               |  |
| W                                                                                                                                                                                                                                                                             |                                                                                                                      | 3 Feedlot               | 7 Domestic (Lawr             |                     | jection Well                            |  |
|                                                                                                                                                                                                                                                                               | _ sw <b>X</b> se                                                                                                     | 4 Industrial            | 8 Air Conditioning           | g 12 Ot             | her                                     |  |
| Was a chemical/bacteriological sample submitted to Department                                                                                                                                                                                                                 |                                                                                                                      |                         |                              | Yes No <u>X</u>     |                                         |  |
|                                                                                                                                                                                                                                                                               | S                                                                                                                    |                         |                              |                     |                                         |  |
| 5                                                                                                                                                                                                                                                                             | TYPE OF BLANK CASING USED: 1 Steel 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (Specify below)                         |                         |                              |                     |                                         |  |
| 1 Steel 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (Specify below 2 PVC 4 ABS 6 Asbestos-Cement 8 Concrete Tile                                                                                                                                                                |                                                                                                                      |                         |                              |                     |                                         |  |
|                                                                                                                                                                                                                                                                               | Blank casing diameter in. Was casing pulled? Yes NoX If yes, how much                                                |                         |                              |                     |                                         |  |
|                                                                                                                                                                                                                                                                               | Casing height above or below land surface 42 in.                                                                     |                         |                              |                     |                                         |  |
|                                                                                                                                                                                                                                                                               |                                                                                                                      |                         |                              |                     |                                         |  |
| 6                                                                                                                                                                                                                                                                             | 6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other hole plug                                    |                         |                              |                     |                                         |  |
|                                                                                                                                                                                                                                                                               |                                                                                                                      |                         |                              |                     |                                         |  |
|                                                                                                                                                                                                                                                                               | Grout Plug Intervals: From ft. to ft., From ft. to ft., From 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 None 3 Watertight sewer lines 8 Sewage lagoon 13 Insecticide storage |                         |                              |                     |                                         |  |
|                                                                                                                                                                                                                                                                               | 4 Lateral lines 9 Feedyard 14 Abandoned water well Direction from well?                                              |                         |                              |                     |                                         |  |
|                                                                                                                                                                                                                                                                               | 5 Cess pool 10 Livestock pens 15 Oil well/Gas well How many feet?                                                    |                         |                              |                     |                                         |  |
|                                                                                                                                                                                                                                                                               | FROM TO PLUGGIN                                                                                                      | NG MATERIALS            | FROM TO                      | PLUGGING N          | ATERIALS                                |  |
|                                                                                                                                                                                                                                                                               | 140 3½ Hole plug                                                                                                     |                         |                              |                     |                                         |  |
|                                                                                                                                                                                                                                                                               | $3\frac{1}{2}$ 0 Top soil                                                                                            |                         |                              |                     |                                         |  |
|                                                                                                                                                                                                                                                                               |                                                                                                                      |                         |                              |                     |                                         |  |
|                                                                                                                                                                                                                                                                               |                                                                                                                      |                         |                              |                     |                                         |  |
|                                                                                                                                                                                                                                                                               |                                                                                                                      |                         |                              |                     |                                         |  |
|                                                                                                                                                                                                                                                                               |                                                                                                                      |                         |                              |                     |                                         |  |
|                                                                                                                                                                                                                                                                               |                                                                                                                      |                         |                              |                     |                                         |  |
| 7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was                                                                                                                                                                        |                                                                                                                      |                         |                              |                     |                                         |  |
| Com                                                                                                                                                                                                                                                                           | pleted on (mo/day/year) 7-21-09<br>I Contractor's License No. 134                                                    | and this record         | ord was completed o          | of my knowledge and | belief. Kansas Water<br>24-09 under the |  |
| completed on (mo/day/year) 7-21-09 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 134. This Water Well Record was completed on (mo/day/year) 7-24-09 under the business name of Rosencrantz- Bemis by (signature) |                                                                                                                      |                         |                              |                     |                                         |  |
|                                                                                                                                                                                                                                                                               |                                                                                                                      |                         |                              |                     |                                         |  |
| <b>INSTRUCTIONS:</b> 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: 785/296-5522. Send one to Water Well Owner and retain one for your                                                                                                                                               |                                                                                                                      |                         |                              |                     |                                         |  |
| records. Visit us at http://www.kdheks.gov/geo/waterwells.                                                                                                                                                                                                                    |                                                                                                                      |                         |                              |                     |                                         |  |