

WATER WELL PLUGGING RECORD Form WWC-5P KSA 82a-1212 ID NO. 0041371

1	LOCATION OF WATER WELL:	Fraction County: Gray SE $\frac{1}{4}$ NW $\frac{1}{4}$ NE $\frac{1}{4}$	Section Number 11	Township Number 26S	Range Number 28	Number E/W																											
Distance and direction from nearest town or city street address of well if located within city? 111 E. Ave A Cimarron, KS																																	
2	WATER WELL OWNER:	Presto Convenience Stores Box 609 RR #, St. Address, Box #: Andover, KS 67002 City, State, ZIP Code					Board of Agriculture, Division of Water Resources Application Number:																										
3	MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:	<table border="1" style="display: inline-table; vertical-align: middle;"> <tr><td></td><td></td><td style="text-align: center;">N</td></tr> <tr><td></td><td style="text-align: center;">✓</td><td>NE</td></tr> <tr><td>NW</td><td></td><td></td></tr> <tr><td></td><td></td><td>E</td></tr> <tr><td>W</td><td></td><td></td></tr> <tr><td></td><td></td><td></td></tr> <tr><td>SW</td><td></td><td>SE</td></tr> <tr><td></td><td></td><td>S</td></tr> </table>								N		✓	NE	NW					E	W						SW		SE			S		
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4	DEPTH OF WELL WELL'S STATIC WATER LEVEL	ft. ft.																															
WELL WAS USED AS:																																	
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Was a chemical / bacteriological sample submitted to Department? Yes No If yes, mo/day/yr sample was submitted																																	
Water Well Disinfected: Yes No ✓																																	
5	TYPE OF BLANK CASING USED:																																
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Blank casing diameter in. Was casing pulled? Yes No If yes, how much Casing height above or below land surface in.																																	
6	GROUT PLUG MATERIAL:	1 Neat cement	2 Cement grout	3 Bentonite	4 Other																											
Grout Plug Intervals: From ft. to ft., From ft. to ft., From ft. to ft.																																	
What is the nearest source of possible contamination:																																	
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Direction from well? How many feet? W 20																																	
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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) 7-8-08 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 754735 This Water Well Record was completed on (mo/day/year) 7-16-08 under the business name of MILCO Environmental Services, Inc. by (signature) Day 10/																																
INSTRUCTIONS: Use typewriter or ball point 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.																																	