

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

1 LOCATION OF WATER WELL: County: Gray		Fraction SW 1/4 SE 1/4 NE 1/4 NW 1/4	Section Number 12	Township Number T 26 S	Range Number 28 ☐ E ☒ W
Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here ☐ 901 E. Avenue A, Cimarron KS			Global Positioning Systems (GPS) information: Latitude: 37.80669 (in decimal degrees) Longitude: -100.33483 (in decimal degrees) Elevation: 2636' AMSL Datum: ☐ WGS84, ☒ NAD83, ☐ NAD27 Collection Method: ☐ GPS unit (Make/Model: _____) ☒ Digital Map/Photo, ☐ Topographic Map, ☐ Land Survey Est. Accuracy: ☐ < 3 m, ☒ 3-5 m, ☐ 5-15 m, ☐ > 15 m		
2 WATER WELL OWNER: Donald Thurston / T-Bone Travel Plaza RR#, St. Address, Box #: Box 247 City, State ZIP Code: Cimarron, KS 67835					

3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX: 	4 DEPTH OF WELL 75 ft. WELL'S STATIC WATER LEVEL 69.68 ft. WELL WAS USED AS: <table border="0"> <tr> <td>☐ Domestic</td> <td>☐ Public Water Supply</td> <td>☐ Dewatering</td> </tr> <tr> <td>☐ Irrigation</td> <td>☐ Oil Field Water Supply</td> <td>☒ Monitoring</td> </tr> <tr> <td>☐ Feedlot</td> <td>☐ Domestic (Lawn & Garden)</td> <td>☐ Injection Well</td> </tr> <tr> <td>☐ Industrial</td> <td>☐ Air Conditioning</td> <td>☐ Other _____</td> </tr> </table> Was a chemical/bacteriological sample submitted to Department? Yes ☐ No ☒	☐ Domestic	☐ Public Water Supply	☐ Dewatering	☐ Irrigation	☐ Oil Field Water Supply	☒ Monitoring	☐ Feedlot	☐ Domestic (Lawn & Garden)	☐ Injection Well	☐ Industrial	☐ Air Conditioning	☐ Other _____
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5 TYPE OF BLANK CASING USED:

☐ Steel	☐ RMP (SR)	☐ Wrought	☐ Fiberglass	☐ Other (Specify below) _____
☒ PVC	☐ ABS	☐ Asbestos-Cement	☐ Concrete Tile	

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

6 GROUT PLUG MATERIAL: ☐ Neat cement ☐ Cement grout ☒ Bentonite ☐ Other _____

Grout Plug Intervals: From 3 ft. to 75 ft., From _____ ft. to _____ ft., From _____ to _____ ft.

What is the nearest source of possible contamination:

☐ Septic tank	☐ Seepage pit	☒ Fuel Storage	☐ Other (specify below) _____
☐ Sewer lines	☐ Pit privy	☐ Fertilizer storage	
☐ Watertight sewer lines	☐ Sewage lagoon	☐ Insecticide storage	
☐ Lateral lines	☐ Feedyard	☐ Abandoned water well	Direction from well? Northwest
☐ Cess pool	☐ Livestock pens	☐ Oil well/Gas well	How many feet? 155'

FROM	TO	PLUGGING MATERIALS	FROM	TO	PLUGGING MATERIALS
0	3	Natural Fill			
3	75	Bentonite Hole Plug			
					MW6R

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 7/17/14 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. _____. This Water Well Record was completed on (mo/day/year) 7/18/14 under the business name of GeoStat Environmental by (signature) [Signature]

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: ☐ White Copy ☐ Blue Copy ☐ Pink Copy