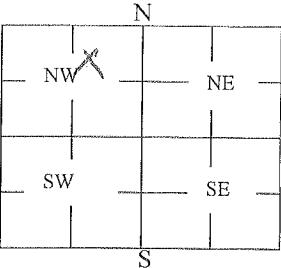


## WATER WELL PLUGGING RECORD

## Form WWC-5P

KSA 82a-1212

ID NO. \_\_\_\_\_

1 LOCATION OF WATER WELL: County: Gray		Fraction SE 1/4 SW 1/4 NE 1/4 NW 1/4	Section Number 12	Township Number T 26 S	Range Number 28 <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"/> 901 E. Avenue A, Cimarron KS			Global Positioning Systems (GPS) information: Latitude: 37.80667 (in decimal degrees) Longitude: -100.33551 (in decimal degrees) Elevation: 2635' AMSL Datum: <input type="checkbox"/> WGS84, <input checked="" type="checkbox"/> NAD83, <input type="checkbox"/> NAD27 Collection Method:																																												
2 WATER WELL OWNER: Donald Thurston / T-Bone Travel Plaza RR#, St. Address, Box #: Box 247 City, State ZIP Code: Cimarron, KS 67835			<input type="checkbox"/> GPS unit (Make/Model): _____ <input checked="" type="checkbox"/> Digital Map/Photo, <input type="checkbox"/> Topographic Map, <input type="checkbox"/> Land Survey Est. Accuracy: <input type="checkbox"/> < 3 m, <input checked="" type="checkbox"/> 3-5 m, <input type="checkbox"/> 5-15 m, <input type="checkbox"/> > 15 m																																												
3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF WELL 75 ft. WELL'S STATIC WATER LEVEL 68.95 ft WELL WAS USED AS:																																													
		<input type="checkbox"/> Domestic <input type="checkbox"/> Public Water Supply <input type="checkbox"/> Irrigation <input type="checkbox"/> Oil Field Water Supply <input type="checkbox"/> Feedlot <input type="checkbox"/> Domestic (Lawn & Garden) <input type="checkbox"/> Industrial <input type="checkbox"/> Air Conditioning <input checked="" type="checkbox"/> Dewatering <input type="checkbox"/> Monitoring <input type="checkbox"/> Injection Well <input type="checkbox"/> Other _____																																													
Was a chemical/bacteriological sample submitted to Department? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>																																															
5 TYPE OF BLANK CASING USED:																																															
<input type="checkbox"/> Steel <input type="checkbox"/> RMP (SR) <input type="checkbox"/> Wrought <input type="checkbox"/> Fiberglass <input checked="" type="checkbox"/> PVC <input type="checkbox"/> ABS <input type="checkbox"/> Asbestos-Cement <input type="checkbox"/> Concrete Tile <input type="checkbox"/> Other (Specify below) _____																																															
Blank casing diameter 2 in. Was casing pulled? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> If yes, how much 3' BGS Casing height above or below land surface _____ in.																																															
6 GROUT PLUG MATERIAL: <input type="checkbox"/> Neat cement <input type="checkbox"/> Cement grout <input checked="" type="checkbox"/> Bentonite <input type="checkbox"/> 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:																																															
<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 type="checkbox"/> Livestock pens		<input checked="" 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? Northeast How many feet? 75																																															
<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>0</td> <td>3</td> <td>Natural Fill</td> <td></td> <td></td> <td></td> </tr> <tr> <td>3</td> <td>75</td> <td>Bentonite Hole Plug</td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td>MW4R</td> </tr> </tbody> </table>						FROM	TO	PLUGGING MATERIALS	FROM	TO	PLUGGING MATERIALS	0	3	Natural Fill				3	75	Bentonite Hole Plug																											MW4R
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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) 7/17/14 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 <u>Geosight Environmental</u> by (signature) <u>John M</u>																																															
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 <a href="http://www.kdheks.gov/waterwell/index.html">http://www.kdheks.gov/waterwell/index.html</a> .																																															
Check one: <input type="checkbox"/> White Copy <input type="checkbox"/> Blue Copy <input type="checkbox"/> Pink Copy																																															