W	ATER WELL PLUGGI	NG RECO	DRD Form WW	C-5P	KSA 82a-	1212 ID NO.	20060495	
1	LOCATION OF WATER WE		Fraction		on Number	Township Num	ber Range Number	
	County: Kingman		NE 1/4 SW 1/4 SE	1/4	14		10 XEXW	
	County: Kingman NE 1/4 SW 1/4 SE 1/4 14 27 10 XEXW Distance and direction from nearest town or city street address of well if located within city?							
	2.2// Foot 2 Nouth of Owningham							
2	2 3/4 Fast, 3 North of Cunningham WATER WELL OWNER: Phillips Exploration Global Positioning Systems (decimal degrees, min. of 4 control of the control of th							
_	THITTIPS Exploration							
	RR#, St. Address, Box #:	4109 N.	Ironwood	Longitu	Latitude:			
	Give Guy GM G. I			Elevation	Elevation:			
	City, State ZIP Code:	Wichita,	Ks. 67226	Datum:	llection Met	hadı		
_	MADIAWELLICIOCATIO	NT 14	DYDMILOEWELL					
3	MARK WELL'S LOCATION WITH AN "X" IN SECTION		DEPTH OF WELL	135_	ft.			
	BOX:	WELL'S STATIC WATER LEVEL 44 ft						
	N	WELL WAS LIGED AS.						
	WELL WAS USED AS:							
	NW NE —		1 Domestic	5 Public	c Water Supr	oly 9 D	ewatering	
***			2 Irrigation	6_Oil F	ield Water S	upply 10 N	Monitoring	
W		Е	3 Feedlot	7 Dome	estic (Lawn a	& Garden) 11 I	njection Well	
	SW SE		4 Industrial	8 Air C	Conditioning	12 (Other	
	 X		Was a chemical/hacte	eriological s	amnle suhm	itted to Department	? Yes NoX	
	S		vv as a chemical/back	citologicals	ampie subm	nted to Department:	10510	
5	TYPE OF BLANK CASING USED:							
	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 36 in.								
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?							
	4 Lateral lines 9 Feedyard 14 Abandoned water well Direction from well?							
			MATERIALS	FROM	TO	PLUGGING	MATERIALS	
		e plug soil						
	3 0 100	SOLL						
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was								
completed on (mo/day/year) 10-10-07 and this record is true to the best of my knowledge and belief. Kansas Water								
Wel	l Contractor's License No	134	This Water Well R	ecord was c	ompleted on	(mo/day/year)1()-31-07 under the	
business name of Rosencrantz- Bemis by (signature)								
INSTRUCTIONS: Use typewriter or ballpoint pen. Please press firmly and print clearly. Please fill in blanks, underline or circle the								
corr	ect answers. Send top three co	pies to Kans	as Department of Heal	th and Envi	ronment, Bu	reau of Water, Geol	ogy 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.								