

WATER WELL PLUGGING RECORD

Form WWC-5P

KSA 82a-1212

ID No. 00089379

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number																																
County: Pratt		SE 1/4 SE 1/4 SE 1/4	34	27	13 W																																
Distance and direction from nearest town or city street address of well if located within city? 1412 E. 1st St., Pratt																																					
2 WATER WELL OWNER:		Love's Travel Stops & Country Stores, Inc.																																			
RR#, St. Address, Box #:		PO Box 26210		Board of Agriculture, Division of Water Resources																																	
City, State, ZIP Code:		Oklahoma City, OK 73126		Application Number:																																	
3 MARK WELL'S LOCATON WITH AN "X" IN SECTION BOX:		4 DEPTH OF WELL 45 ft.																																			
<div><div>N</div><div>W<div><div><div>NW</div><div>NE</div><div>SW</div><div>SE</div></div><div>X</div><div>S</div></div><div>E</div></div></div>		WELL'S STATIC WATER LEVEL 25 ft.																																			
		WELL WAS USED AS:																																			
		<div><div>1 Domestic</div><div>2 Irrigation</div><div>3 Feedlot</div><div>4 Industrial</div><div>5 Public Water Supply</div><div>6 Oil Field Water Supply</div><div>7 Lawn and Garden (domestic)</div><div>8 Air Conditioning</div><div>9 Dewatering</div><div>10 Monitoring Well</div><div>11 Injection Well</div><div>12 Other</div></div>																																			
		Was a chemical/bacteriological sample submitted to Department? Yes No X																																			
		If yes, mo/day/yr sample was submitted																																			
		Water Well Disinfected: Yes No X																																			
5 TYPE OF BLANK CASING USED:																																					
<div><div>1 Steel</div><div>2 PVC</div><div>3 RMP (SR)</div><div>4 ABC</div><div>5 Wrought</div><div>6 Asbestos-Cement</div><div>7 Fiberglass</div><div>8 Concrete Tile</div><div>9 Other (specify below)</div></div>																																					
Blank casing diameter 5 in. Was casing pulled? Yes No X If yes, how much																																					
Casing height above or below land surface 240 in. Overdrilled to 20 feet below the ground surface																																					
6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other																																					
Grout Plug Intervals From 3 ft. to 45 ft. From ft. to ft. From ft. to ft.																																					
What is the nearest source of possible contamination:																																					
<div><div>1 Septic tank</div><div>2 Sewer lines</div><div>3 Watertight sewer lines</div><div>4 Lateral lines</div><div>5 Cess Pool</div><div>6 Seepage pit</div><div>7 Pit privy</div><div>8 Sewage lagoon</div><div>9 Feedyard</div><div>10 Livestock pens</div><div>11 Fuel storage</div><div>12 Fertilizer storage</div><div>13 Insecticide storage</div><div>14 Abandoned water well</div><div>15 Oil well/ Gas well</div><div>16 Other (specify below)</div></div>																																					
Direction from well? How many feet?																																					
<table><thead><tr><th>FROM</th><th>TO</th><th>CODE</th><th>PLUGGING MATERIALS</th></tr></thead><tbody><tr><td>0</td><td>3</td><td></td><td>Soil</td></tr><tr><td>3</td><td>45</td><td></td><td>Bentonite</td></tr><tr><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td></tr></tbody></table>						FROM	TO	CODE	PLUGGING MATERIALS	0	3		Soil	3	45		Bentonite																				
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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/yr) 6-4-04 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 531 This Water Well Record was completed on (mo/day/yr) 7-16-04 under the business name of Geotechnical Services, Inc. by (signature) <i>[Signature]</i>																																					
INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment, Bureau of Water, 1000 S W Jackson St., Ste. 420, Topeka, Kansas 66620-0001. Telephone: 785-296-3565. Send one to Water Well Owner and retain one for your records.																																					