

1	LOCATION OF WATER WELL: County: <u>Haskell</u>	Fraction <u>1/4 1/4 1/4</u>	Section Number <u>33</u>	Township Number <u>27</u>	Range Number <u>34</u>
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Distance and direction from nearest town or city street address of well if located within city?

2 WATER WELL OWNER: Vada Duff Trust

RR#, St. Address, Box #: _____ Board of Agriculture, Division of Water Resources
 City, State, ZIP Code : _____ Application Number: _____

3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:
N

	N W		N E
W			E
	S W		S E
	X		
			S

4 DEPTH OF WELL.....284.....ft.
 WELL'S STATIC WATER LEVEL...285...ft. No Water

WELL WAS USED AS:

1 Domestic	5 Public Water Supply	9 Dewatering
<u>2 Irrigation</u>	6 Oil Field Water Supply	10 Monitoring Well
3 Feedlot	7 Lawn and Garden Only	11 Injection Well
4 Industrial	8 Air Conditioning	12 Other.....

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:

<u>1 Steel</u>	3 RMP (SR)	5 Wrought	7 Fiberglass	9 Other (specify below)
2 PVC	4 ABS	6 Asbestos-Cement	8 Concrete Tile

Blank casing diameter...16...in. Was casing pulled? Yes..... No... X If yes, how much.....
 Casing height above or below land surface...4 ft.....in.

6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other.....

Grout Plug Intervals: From...284...ft. to...130...ft., From...3...ft. to...0...ft., From..... to.....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
3 Watertight sewer lines	8 Sewage lagoon	13 Insecticide storage
4 Lateral lines	<u>9 Feedyard</u>	14 Abandoned water well
5 Cess Pool	10 Livestock pens	15 Oil well/Gas well

Direction from well? ...East..... How many feet? ...5000.....

FROM	TO	PLUGGING MATERIALS
<u>284</u>	<u>130</u>	<u>Concrete</u>
<u>130</u>	<u>3</u>	<u>Dirt fill</u>
<u>3</u>	<u>0</u>	<u>Concrete</u>

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year)...6-14-06... 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) ...6-14-06... under the business name of ...Triple A Ranch Inc... by (signature) [Signature]

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, Topeka, Kansas 66620-0001. Telephone: 913/296-3565. Send one to Water Well Owner and retain one for your records.



June 23, 2006

Kansas Department of Health & Environment
Bureau of Water
Topeka, KS 66620-0001

Re: Well Closure – SW¼ 33-27-34, Vada Joan Duff Trust

Dear Sir:

Please find enclosed the three copies of form WWC-5P requested to be mailed to this address to document closure of a water well on property held in the Vada Joan Duff Trust. Please be advised that this was done acceptable to requirements of the Haskell County, NRCS supervision.

If anything additional is needed, please do not hesitate to contact me.

Sincerely,

A handwritten signature in black ink that reads "Parke Carter". The signature is fluid and cursive, with a long horizontal stroke at the end.

Parke Carter
Senior Farm & Ranch Manager

Enclosure