

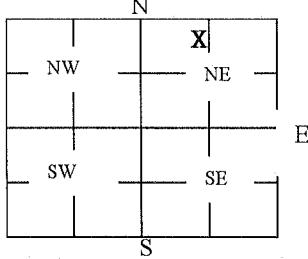
WATER WELL PLUGGING RECORD

Form WWC-5P

KSA 82a-1212

ID NO.

11,731

1 LOCATION OF WATER WELL: County: Gray		Fraction $\frac{1}{4}$ NE $\frac{1}{4}$ NW $\frac{1}{4}$ NE $\frac{1}{4}$	Section Number 18	Township Number T 28 S	Range Number 29 <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"/> Montezuma - 4-1/3rd miles		Global Positioning Systems (GPS) information: Latitude: _____ (in decimal degrees) Longitude: _____ (in decimal degrees) Elevation: _____ Datum: <input type="checkbox"/> WGS84, <input type="checkbox"/> NAD83, <input type="checkbox"/> NAD27																																																			
Southwest on Hwy. 56, 2 miles north, 5,010 Ft. North & 1,681 Ft. West		Collection Method: <input type="checkbox"/> GPS unit (Make/Model: _____) <input type="checkbox"/> Digital Map/Photo, <input type="checkbox"/> Topographic Map, <input type="checkbox"/> Land Survey Est. Accuracy: <input type="checkbox"/> < 3 m, <input type="checkbox"/> 3-5 m, <input type="checkbox"/> 5-15 m, <input type="checkbox"/> > 15 m																																																			
2 WATER WELL OWNER: Fry Family Farms c/o Ag Management Consultants RR#, St. Address, Box #: PO Box 1013, Garden City, KS 67846																																																					
3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF WELL 292 ft. WELL'S STATIC WATER LEVEL 196 ft WELL WAS USED AS:																																																			
		<input type="checkbox"/> Domestic <input type="checkbox"/> Public Water Supply <input checked="" 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 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 checked="" type="checkbox"/> Steel <input type="checkbox"/> RMP (SR) <input type="checkbox"/> Wrought <input type="checkbox"/> Fiberglass <input 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 16 in. Was casing pulled? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If yes, how much _____ Casing height above or below land surface 36 in. Below																																																					
6 GROUT PLUG MATERIAL: <input type="checkbox"/> Neat cement <input checked="" type="checkbox"/> Cement grout <input type="checkbox"/> Bentonite <input type="checkbox"/> Other _____																																																					
Grout Plug Intervals: From 3 ft. to 196 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 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 <input type="checkbox"/> Other (specify below) N/A Direction from well? How many feet?																																																	
<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>Top soil</td> <td></td> <td></td> <td></td> </tr> <tr> <td>3</td> <td>196</td> <td>Cement grout</td> <td></td> <td></td> <td></td> </tr> <tr> <td>196</td> <td>292</td> <td>Chlorinated gravel</td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>						FROM	TO	PLUGGING MATERIALS	FROM	TO	PLUGGING MATERIALS	0	3	Top soil				3	196	Cement grout				196	292	Chlorinated gravel																											
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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) 7-27-11 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 208 . This Water Well Record was completed on (mo/day/year) 7-29-11 under the business name of Minter-Wilson Drilling Co., Inc. by (signature) Nora Keller																																																					
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: <input type="checkbox"/> White Copy <input type="checkbox"/> Blue Copy <input type="checkbox"/> Pink Copy																																																					