

WATER WELL PLUGGING RECORD

Form WWC-5P

KSA 82a-1212

ID No.

VP-15

| | | | | |
|---------------------------|--|----------------|-----------------|--------------|
| 1 LOCATION OF WATER WELL: | Fraction | Section Number | Township Number | Range Number |
| County: Meade | NE $\frac{1}{4}$ NW $\frac{1}{4}$ NE $\frac{1}{4}$ | 11 | 32S | 28W |

Distance and direction from nearest town or city street address of well if located within city?

623 E. Carthage, Meade, KS 67864

2 WATER WELL OWNER: Meade Municipal Plant

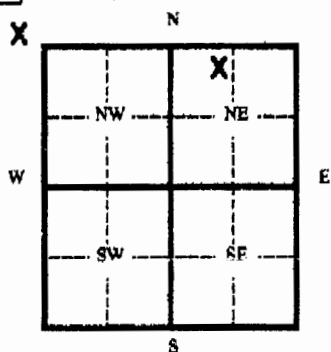
RR#, St. Address, Box # 623 East Carthage St.

City, State, ZIP Code Meade, KS 67864

Board of Agriculture, Division of Water Resources

Application Number:

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



4 DEPTH OF WELL 11.8 ft.

WELL'S STATIC WATER LEVEL ft.

WELL WAS USED AS:

- | | | |
|--------------|------------------------------|--------------------|
| 1 Domestic | 5 Public Water Supply | 9 Dewatering |
| 2 Irrigation | 6 Oil Field Water Supply | 10 Monitoring Well |
| 3 Feedlot | 7 Lawn and Garden (domestic) | 11 Injection Well |
| 4 Industrial | 8 Air Conditioning | 12 Other |

Was a chemical/bacteriological sample submitted to Department? Yes No

If yes, mo/day/yr sample was submitted

Water Well Disinfected: Yes No

5 TYPE OF BLANK CASING USED:

- | | | | | |
|---------|------------|-----------|--------------|-------------------------|
| 1 Steel | 3 RMP (SR) | 5 Wrought | 7 Fiberglass | 9 Other (specify below) |
|---------|------------|-----------|--------------|-------------------------|

- | | | | |
|-------|-------|-------------------|-----------------|
| 2 PVC | 4 ABC | 6 Asbestos-Cement | 8 Concrete Tile |
|-------|-------|-------------------|-----------------|

Blank casing diameter 2 in. Was casing pulled? Yes x No If yes, how much 3 feet

Casing height above or below land surface in.

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

Grout Plug Intervals From ft. to ft. From ft. to ft. From ft. 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 | 9 Feedyard | 14 Abandoned water well | |
| 5 Cess Pool | 10 Livestock pens | 15 Oil well/ Gas well | |

Direction from well? How many feet?

| FROM | TO | CODE | PLUGGING MATERIALS |
|------|-------|------|--------------------|
| 0 | 3' | | Native |
| 3' | 11.8' | | Bentonite Chips |
| | | | |
| | | | |
| | | | |
| | | | |

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/yr) 3/25/14 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 4/15/14 This Water Well Record was completed on (mo/day/yr) under the business name of Bluestem Environmental Engineering, Inc. by (signature) *Nick Holt*

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: 785-296-3585. Send one to Water Well Owner and retain one for your records.