

WATER WELL PLUGGING RECORD Form WWC-5P KSA 82a-1212 ID NO.

1 LOCATION OF WATER WELL: County: Stevens	Fraction ¼ NC ¼ SW ¼	Section Number 13	Township Number 34	Range Number 37 E/W
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Distance and direction from nearest town or city street address of well if located within city?
From Hugoton; Appx 6 miles south and 2 miles east.

2 WATER WELL OWNER: Gary Mostrom

RR#, St. Address, Box #: PO Box 309

City, State, ZIP Code: Hugoton, KS 67951

Global Positioning System (decimal degrees, min. of 4 digits)

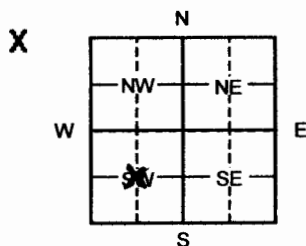
Latitude: _____

Longitude: _____

Elevation: _____

Datum: _____

Data Collection Method: _____

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

4 DEPTH OF WELL unknown ft.

WELL'S STATIC WATER LEVEL 215 ft

WELL WAS USED AS:

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

Was a chemical/bacteriological sample submitted to Department? Yes ___ No ☒
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 16 in. Was casing pulled? Yes ___ No ☒ If yes, how much _____

Casing height above or below land surface -60 in.

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

Grout Plug Intervals: From 5 ft. to 16 ft., From _____ ft. to _____ 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 | 9 Feedyard | 14 Abandoned water well | Direction from well? |
| 5 Cess pool | 10 Livestock pens | 15 Oil well/Gas well | How many feet? |

FROM	TO	PLUGGING MATERIALS	FROM	TO	PLUGGING MATERIALS
?	215	Sand			
215	16	Clay			
16	5	Cement			
5	0	Backfill			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 12/8/2008 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 145. This Water Well Record was completed on (mo/day/year) 12/23/2008 under the business name of Henkle Drilling & Supply Co., Inc. by (signature) [Signature]

INSTRUCTIONS: Please fill in blanks 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: 785/296-5522. Send one to Water Well Owner and retain one for your records. Visit us at <http://www.kdheks.gov/waterwell>.