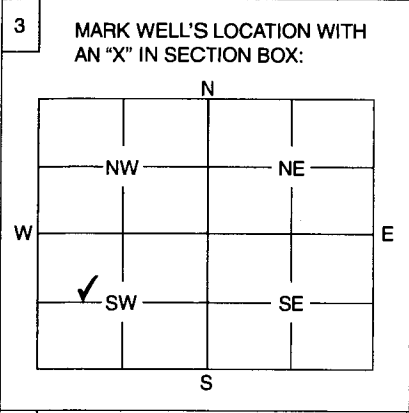


1	LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
	County: <b>Decatur</b>	SE ¼ NW ¼ SW ¼	<b>1</b>	<b>3</b>	<b>29</b>

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

2 WATER WELL OWNER: **City of Oberlin**  
**107 W. Commercial**  
 RR #, St. Address, Box #: **Oberlin, KS 67749**  
 City, State, ZIP Code : **Oberlin, KS 67749**  
 Board of Agriculture, Division of Water Resources  
 Application Number:



4 DEPTH OF WELL **35.05** ft.  
 WELL'S STATIC WATER LEVEL **25.40** 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 Domestic (Lawn & Garden)                       Injection Well AS-5  
 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 ABS      6 Asbestos-Cement      8 Concrete Tile .....

Blank casing diameter **2**" in.      Was casing pulled? Yes  No .....      If yes, how much **3**'  
 Casing height above or below land surface **3**' in.

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

Grout Plug Intervals:      From **3** ft. to **35.05** ft.,      From ..... ft. to ..... ft.,      From ..... to ..... ft.

What is the nearest source of possible contamination:  
 1 Septic tank                      6 Seepage pit                       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	PLUGGING MATERIALS
<b>0</b>	<b>3</b>	<b>native soil</b>
<b>3</b>	<b>35.05</b>	<b>bentonite hole plug</b>

7 CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) **11/20/13** and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **735**. This Water Well Record was completed on (mo/day/year) **11/21/13** under the business name of **MILCO Environmental Services, 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, 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.

MILCO Environmental Services, Inc.  
 320 W. 4<sup>th</sup> Street  
 Colby, KS 67701  
 (785)-460-1956

Daily Field Log For: Alizmendis Dan  
 Project: Obeclin Warehouse  
 Weather Conditions: 45  
 Travel Time (manhours): #1 2.0  
 Travel Time (manhours): #2 \_\_\_\_\_  
 Total Job Time (manhours): 8.0

Date: 11-20-13  
 Job No.: M-245-61-01  
 Project Manager: \_\_\_\_\_  
 Onsite / Offsite: #1 1030/1500  
 Onsite / Offsite: #2 \_\_\_\_\_

NAME	WORK PERFORMED	HOURS
#1 <u>Alizmendis Dan</u>	<u>Abandoning wells</u>	<u>4.5</u>
#2 <u>Travis Zerr</u>	<u>Same</u>	
<u>Dan Alizmendis</u>	Prep Time	<u>1.0</u>
<u>Dan Alizmendis</u>	Paperwork	<u>.5</u>
	Sample Packing & Shipping	

**Additional Personnel on Site (client, regulatory, subcontractor, visitor):**

NAME	AFFILIATION	WORK PERFORMED	TIME

**Equipment used on site:** (check all that apply)

- |  |   |  |
|--|---|--|
| <input checked="" type="checkbox"/> <u>Water Level Indicator</u> | <input type="checkbox"/> Multigas Detector (MultiRae) | <input type="checkbox"/> Air Compressor        |
| <input type="checkbox"/> Interface Probe                         | <input type="checkbox"/> Air Flow Meter (Velosicalc)  | <input type="checkbox"/> Bobcat/Skidloader     |
| <input type="checkbox"/> Dissolved Oxygen Meter                  | <input type="checkbox"/> Manometer                    | <input type="checkbox"/> Pressure Washer       |
| <input type="checkbox"/> Submersible Pump                        | <input type="checkbox"/> Air Sample Pump              | <input type="checkbox"/> Survey Equipment      |
| <input type="checkbox"/> Field Sampling Trailer                  | <input type="checkbox"/> PID-Photoionization Detector | <input type="checkbox"/> AS Blower GAST 2567   |
| <input type="checkbox"/> Generator                               | <input type="checkbox"/> pH Meter                     | <input type="checkbox"/> SVE Blower Rotron 858 |
| <input type="checkbox"/> Metal Detector                          | <input type="checkbox"/> pH/Conductivity/Temp Meter   | <input type="checkbox"/> GPS                   |
| <input type="checkbox"/> Waterra Pump Jack                       | <input type="checkbox"/> Combustion/O2/Tox Meter      | <input type="checkbox"/> Data Logger           |
| <input type="checkbox"/> Other <u>Sack Hammer</u>                | <input type="checkbox"/> Other _____                  | <input type="checkbox"/> Other _____           |

**Materials used on site:**

ITEM	QUANTITY	ITEM	QUANTITY
<u>10</u>			
<u>10</u>	<u>Days Cement</u>		
<u>10</u>	<u>Days Hole Plug</u>		

**Activities performed** (site work, system adjustments, maintenance/repairs performed, observations, etc):

take photos before and after  
Cement out plug wells. Things went good.  
and I got good help.  
Cut PVC pipe off at 3 feet and hole plug wells and put dirt 3 feet down wells.

**Repairs/Parts needed:**

Dan Alizmendis  
 Signature

Amendments

Zerr

11-20-13

Field Tech:

Date:

Oberlin Warehouse

M245-G1-01

Site Name:

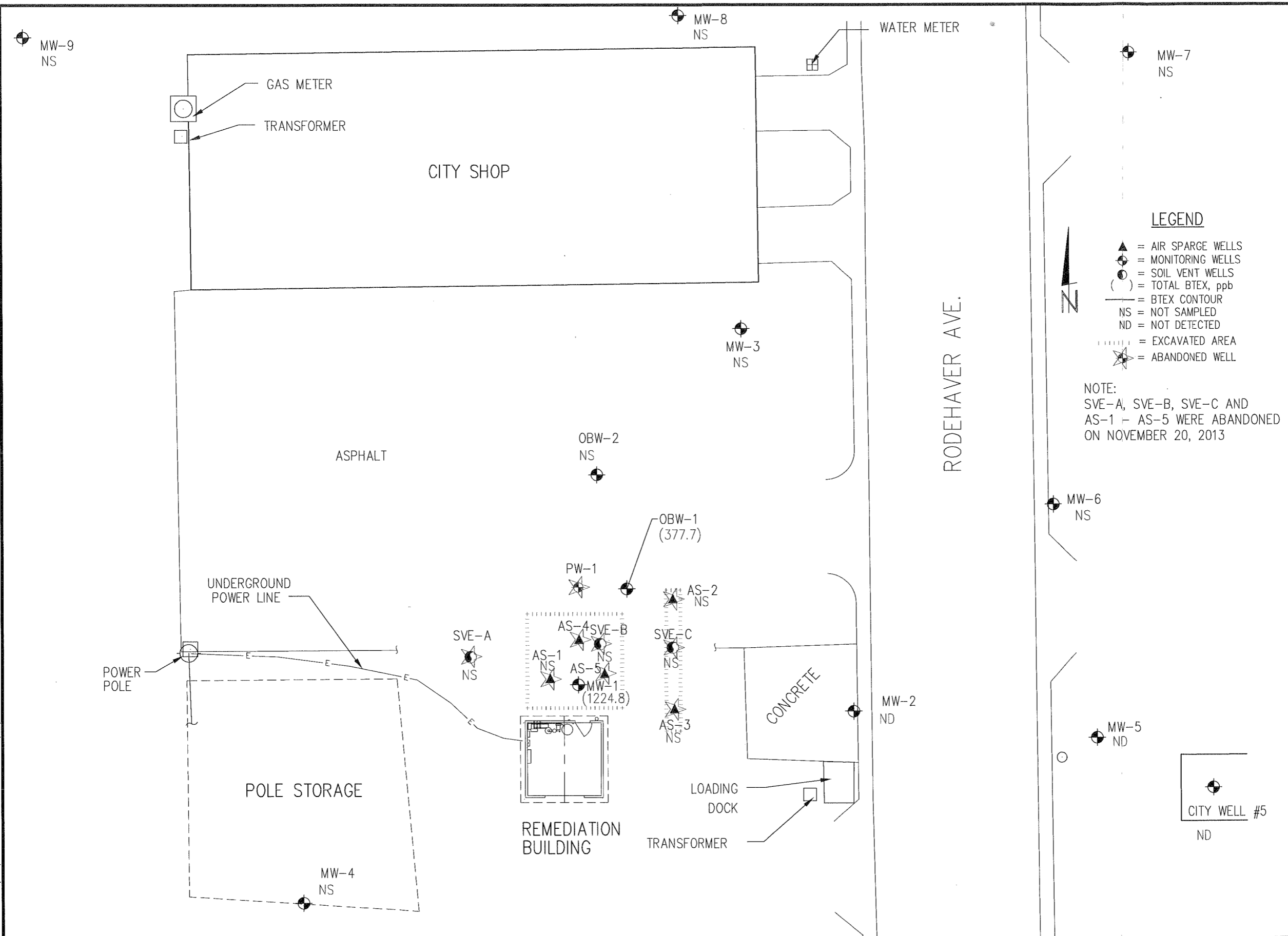
Project #:

Well ID:	State Tag #	Old Tag #	Cement Net Wt #	Pipe Size	Bottom of Casing	Water Level
SVE-A	00160797	no	Dirt	4	16.48	Dry
SVE-B	00309813	no	Cement	4	17.55	Dry
SVE-C	00309820	no	Cement	4	19.25	Dry
AS-1	00309783	no	Cement	2	<del>29.56</del> 31.08	25.56
AS-2	00309790	no	Cement	2	31.53	28.00
AS-3	00309806	no	Cement	2	31.40	25.40
AS-4	0041316	no	Cement	2	29.92	25.37
AS-5	0041317	no	Cement <u>cut</u>	2	35.05	25.40

RECEIVED  
DEC 02 2013  
BUREAU OF WATER

471411

PLOTTED: 11/21/2013 11:17 AM SAVED: 11/21/2013 11:17 AM Brian S. Fahrenbruch c:\projects\245\245-G1-001-01\Quarterly's\Figure Site 11-21-13.dwg



REVISIONS	BY

**MILCO**  
 Environmental  
 Services, Inc.

**SITE MAP**  
**City of Oberlin - Warehouse**  
**KDHE U6020628**

SCALE:	1" = 20'
PROJECT NO.	M245-G1-001
FIELD BOOK NO.	SEE FILE
DATE:	November, 2013
DRAWN BY:	BSF
APPROVED BY:	

FIGURE  
 S

RECEIVED  
 DEC 02 2013  
 PUBLIC WORKS



RECEIVED  
DEC 02 2013  
BUREAU OF WATER

## MILCO

**Environmental Services, Inc.**

320 W. 4<sup>th</sup> Street  
Colby, KS 67701  
Tel: 785-460-1956  
Fax: 785-460-4220

Photos: City of Oberlin Warehouse  
Before and After Photos of Plugged Wells:  
AS-4 and AS-5  
MILCO Project No. M245-G1-01