

**WATER WELL PLUGGING RECORD**

Form WWC-5P

KSA 82a-1212

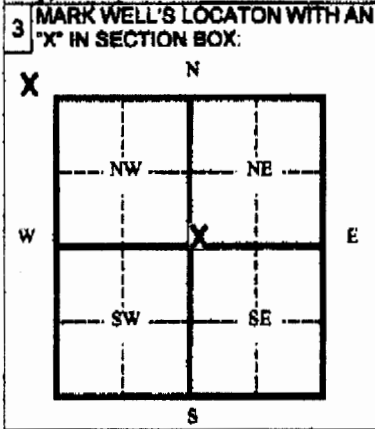
ID No.

MW-17

1 LOCATION OF WATER WELL: Fraction	Section Number	Township Number	Range Number
County: Rawlins SW 1/4 SW 1/4 NE 1/4	8	3 S	33 W

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

2 WATER WELL OWNER: MaxFee Oil Company  
 RR#, St. Address, Box # 707 South 3rd  
 City, State, ZIP Code : Atwood, KS 67730  
 Board of Agriculture, Division of Water Resources  
 Application Number:



4 DEPTH OF WELL 20 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 4 in. Was casing pulled? Yes  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	20		Bentonite grout

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/yr) 11/9/15 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 11/18/15 under the business name of Bluestem Environmental Engineering, Inc. This Water Well Record was completed on (mo/day/yr) \_\_\_\_\_ 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: 785-296-3565. Send one to Water Well Owner and retain one for your records.