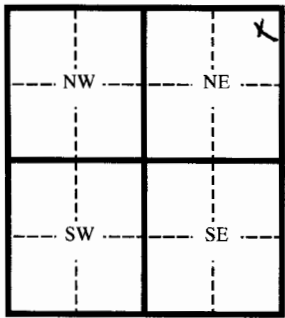


WATER WELL PLUGGING RECORD

FORM WWC-5P

KSA 82a-1212

1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number																																				
County: Decatur	NE 1/4 NE 1/4 NE 1/4	22	5	30																																				
Distance and direction from nearest town or city street address of well if located within city?																																								
2 WATER WELL OWNER: Gail Mumm																																								
RR#, St. Address, Box # Box 63																																								
City, State, ZIP Code : Selden, KS 67757																																								
Board of Agriculture, Division of Water Resources Application Number: 20070244																																								
3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF WELL 155 ft.																																						
		WELL'S STATIC WATER LEVEL 85 ft. WELL WAS USED AS: <table style="width:100%;"> <tr> <td>1 Domestic</td> <td>5 Public Water Supply</td> <td>9 Dewatering</td> </tr> <tr> <td>2 Irrigation</td> <td>☒ 6 Oil Field Water Supply</td> <td>10 Monitoring Well</td> </tr> <tr> <td>3 Feedlot</td> <td>7 Lawn and Garden (domestic)</td> <td>11 Injection Well</td> </tr> <tr> <td>4 Industrial</td> <td>8</td> <td>12 Other</td> </tr> </table>			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	12 Other																								
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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:																																								
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Blank casing diameter 4.5 in. Was casing pulled? Yes _____ No ☒ If yes, how much _____																																								
Casing height above or below land surface -36 in.																																								
6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout <u>3 Bentonite</u> 4 Other _____																																								
Grout Plug Intervals From 3 ft. to 6 ft. From 82 ft. to 85 ft. From _____ ft. to _____ ft.																																								
What is the nearest source of possible contamination:																																								
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Direction from well? _____ How many feet? _____																																								
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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/yr) 2/06/08 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 554783 This Water Well Record was completed on (mo/day/yr) 9/01/09 under the business name of Woofert Pump & Well Inc. by (signature) <i>[Signature]</i>																																								
INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment, Bureau of Water, Topeka, Kansas 66620-0001. Telephone: 785-296-3565. Send one to Water Well Owner and retain one for your records.																																								