

WATER WELL PLUGGING RECORD Form WWC-5P

KSA 82a-1212 ID NO.

DSVE-10

1 LOCATION OF WATER WELL: County: Sheridan	Fraction ¼ SE ¼ NW ¼ SW ¼	Section Number 9	Township Number T 6 S	Range Number 29 <input type="checkbox"/> E <input checked="" type="checkbox"/> W
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Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here Hwy 4, Nebraska Ave, Selden, KS

Global Positioning Systems (GPS) information:
 Latitude: _____ (in decimal degrees)
 Longitude: _____ (in decimal degrees)
 Elevation: _____
 Horizontal Datum: WGS84, NAD83, NAD27
 Collection Method:
 GPS unit (Make/Model: _____)
 Digital Map/Photo, Topographic Map, Land Survey
 Est. Accuracy: < 3 m, 3-5 m, 5-15 m, > 15 m

2 WATER WELL OWNER: Home Oil Company
 RR#, St. Address, Box #: 1629 Hillcrest Rd
 City, State ZIP Code: Lawrence, KS 66044

<p>3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:</p>	<p>4 DEPTH OF WELL <u>131.00</u> ft. WELL'S STATIC WATER LEVEL <u>DRY</u> ft WELL WAS USED AS: <input type="checkbox"/> Domestic <input type="checkbox"/> Public Water Supply <input type="checkbox"/> Dewatering <input type="checkbox"/> Irrigation <input type="checkbox"/> Oil Field Water Supply <input checked="" type="checkbox"/> Monitoring DSVE-10 <input type="checkbox"/> Feedlot <input type="checkbox"/> Domestic (Lawn & Garden) <input type="checkbox"/> Injection Well <input type="checkbox"/> Industrial <input type="checkbox"/> Air Conditioning <input type="checkbox"/> Other _____ Was a chemical/bacteriological sample submitted to Department? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/></p>
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5 TYPE OF BLANK CASING USED:

Steel RMP (SR) Wrought Fiberglass Other (Specify below) _____
 PVC ABS Asbestos-Cement Concrete Tile

Blank casing diameter 4 in. Was casing pulled? Yes No If yes, how much _____
 Casing height above or below land surface >-12 in.

6 GROUT PLUG MATERIAL: Neat cement Cement grout Bentonite Other _____

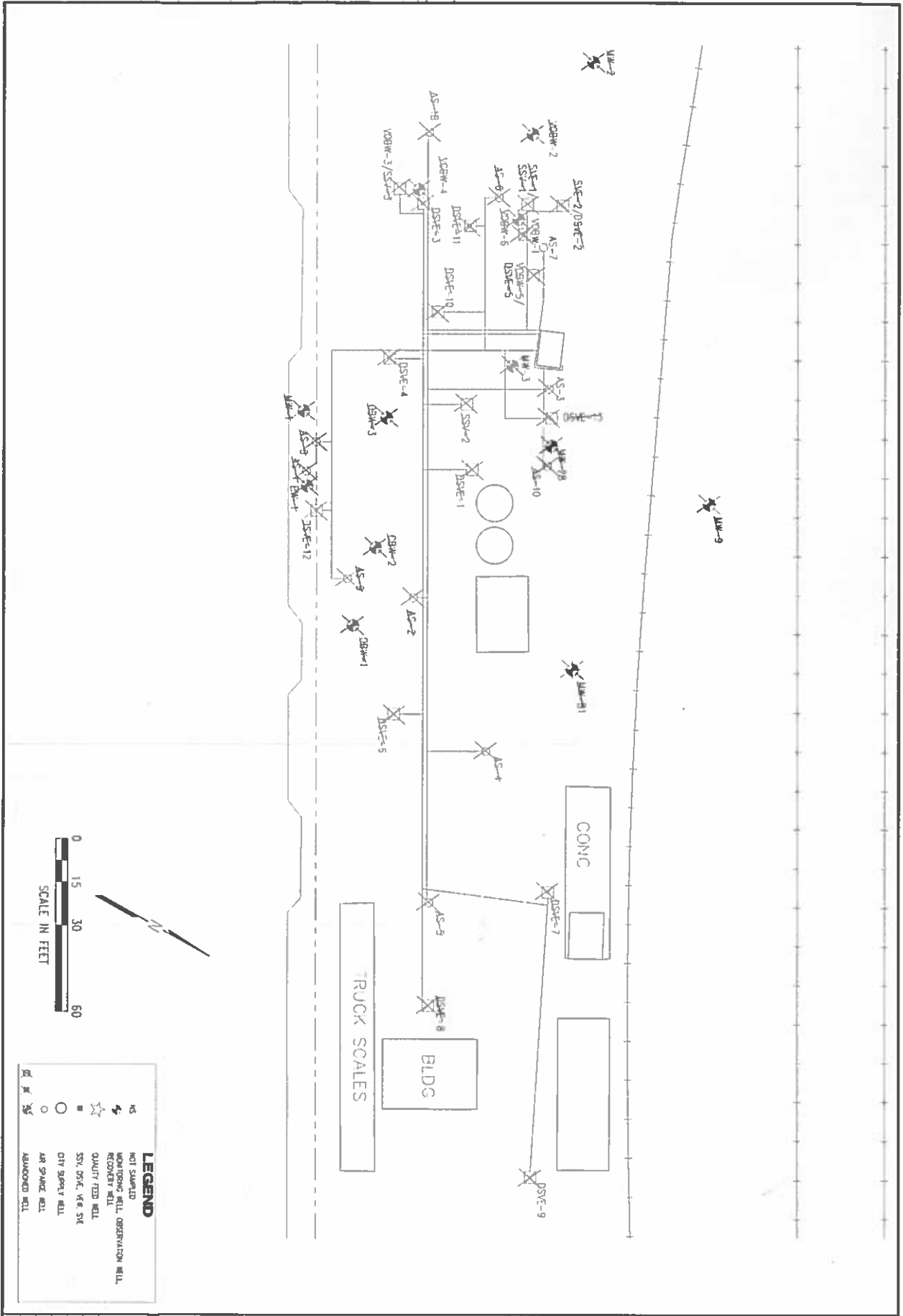
Grout Plug Intervals: From 4 ft. to 131.00 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.

What is the nearest source of possible contamination:
 Septic tank Seepage pit Fuel storage Other (specify below) _____
 Sewer lines Pit privy Fertilizer storage _____
 Watertight sewer lines Sewage lagoon Insecticide storage _____
 Lateral lines Feedyard Abandoned water well Direction from well? _____
 Cess pool Livestock pens Oil well/Gas well How many feet? _____

FROM	TO	PLUGGING MATERIALS	FROM	TO	PLUGGING MATERIALS
0	4	Native Soil			Notes: Well vault & pad were left in place, approx. 1' bgs per Pam Chaffee/BOW approval. Fraction listed as NE NW SW on original well record. Home Oil Bulk Plant: U6-090-00221
4	131.00	Bentonite Grout			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 8/31/17 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) 11/9/17 under the business name of MILCO Environmental Services, Inc. by (signature) *[Signature]*

Send one white copy to Kansas Department of Health & Environment, Geology Section, 1000 SW Jackson Street, Ste. 420, Topeka, KS 66612-1367. Send one copy to WATER WELL OWNER and retain one for your records.
 Visit us at <http://www.kdheks.gov/waterwell/index.html> Telephone 785-296-5524.



LEGEND

AS	NOT SAMPLED
DS	MONITORING WELL, OBSERVATION WELL
SS	RECOVERY WELL
VOB	QUALITY FEED WELL
☆	SSV, DSAC, VOB SVK
□	CITY SUPPLY WELL
○	AIR SPARGE WELL
⊗	ABANDONED WELL

FIGURE 1

DATE: 01/19/2010
 PROJECT: U6-090-221
 DRAWN BY: [Name]
 CHECKED BY: [Name]
 SCALE: AS SHOWN

**HOME OIL
 REMEDIAL SITE MAP
 SELDEN, KANSAS U6-090-221**

MILCO
 Environmental
 Services, Inc.
 1000 West 10th Street
 Selden, KS 67484-1411
 Phone: 785.833.4411