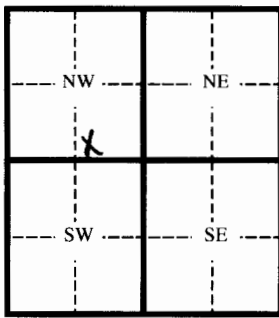
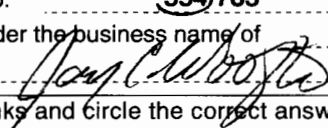


## WATER WELL PLUGGING RECORD

FORM WWC-5P

KSA 82a-1212

<b>1</b> LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number																																
County: <b>Thomas</b>	<b>SW</b> 1/4 <b>SE</b> 1/4 <b>NW</b> 1/4	<b>20</b>	<b>9</b>	<b>32 W</b>																																
Distance and direction from nearest town or city street address of well if located within city?																																				
<b>2</b> WATER WELL OWNER: <b>Veleda Steinle</b>																																				
RR#, St. Address, Box # <b>450 La Hacienda Dr</b>		Board of Agriculture, Division of Water Resources																																		
City, State, ZIP Code : <b>Colby, KS 67701</b>		Application Number: <b>20080148</b>																																		
<b>3</b> MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:	<b>4</b> DEPTH OF WELL <b>210</b> ft.																																			
	WELL'S STATIC WATER LEVEL <b>180</b> ft.																																			
	WELL WAS USED AS:																																			
	<div style="display: flex; justify-content: space-between;"> <div> 1 Domestic 2 Irrigation 3 Feedlot 4 Industrial </div> <div> 5 Public Water Supply <b>6</b> Oil Field Water Supply 7 Lawn and Garden (domestic) 8 </div> <div> 9 Dewatering 10 Monitoring Well 11 Injection Well 12 Other </div> </div>																																			
Was a chemical/bacteriological sample submitted to Department? Yes _____ No <b>X</b>																																				
If yes, mo/day/yr sample was submitted _____																																				
Water Well Disinfected: Yes <b>X</b> No _____																																				
<b>5</b> TYPE OF BLANK CASING USED:																																				
1 Steel      3 RMP (SR)      5 Wrought      7 Fiberglass      9 Other (specify below) <b>2</b> PVC      4 ABC      6 Asbestos-Cement      8 Concrete Tile																																				
Blank casing diameter <b>4.5</b> in. Was casing pulled? Yes _____ No <b>X</b> If yes, how much _____																																				
Casing height above or below land surface <b>-36</b> in.																																				
<b>6</b> GROUT PLUG MATERIAL: 1 Neat cement    2 Cement grout <b>3 Bentonite</b> 4 Other _____																																				
Grout Plug Intervals From <b>3</b> ft. to <b>6</b> ft. From <b>177</b> ft. to <b>180</b> ft. From _____ ft. to _____ ft.																																				
What is the nearest source of possible contamination:																																				
<div style="display: flex; flex-wrap: wrap;"> <div style="width: 33%;">1 Septic tank</div> <div style="width: 33%;">6 Seepage pit</div> <div style="width: 33%;">11 Fuel storage</div> <div style="width: 33%;">16 Other (specify below)</div> <div style="width: 33%;">2 Sewer lines</div> <div style="width: 33%;">7 Pit privy</div> <div style="width: 33%;">12 Fertilizer storage</div> <div style="width: 33%;">3 Watertight sewer lines</div> <div style="width: 33%;">8 Sewage lagoon</div> <div style="width: 33%;">13 Insecticide storage</div> <div style="width: 33%;">4 Lateral lines</div> <div style="width: 33%;">9 Feedyard</div> <div style="width: 33%;">14 Abandoned water well</div> <div style="width: 33%;">5 Cess Pool</div> <div style="width: 33%;">10 Livestock pens</div> <div style="width: 33%;">15 Oil well/ Gas well</div> </div>																																				
Direction from well? _____ How many feet? _____																																				
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<b>7</b> CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/yr) <b>7/16/10</b> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <b>554783</b> This Water Well Record was completed on (mo/day/yr) <b>7/20/10</b> under the business name of <b>Woofert Pump &amp; Well Inc.</b>																																				
by (signature) 																																				
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.																																				