

J. R. Simplot Co.

17199 Co. Rd. 21 • Fort Morgan, CO 80701 • 970-542-0034 • fax 970-542-0034

August 19, 1998

Iowa Department of Natural Resources
Solid Waste Section
Dr. Calvin Lundberg
Wallace State Office Building
Des Moines, IA 50319

Subject: Abandoned Water Well Plugging Records
Simplot Soilbuilders
Ware, Iowa
Sac City, Iowa

Dear Dr. Lundberg,

Several monitoring wells were abandoned at the Ware and Sac City Soilbuilder properties on July 1, 1998. The work was completed by Rewerts Well Company, Nevada, Iowa.

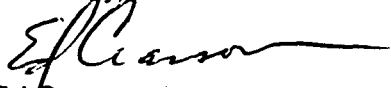
I submit to you the enclosed forms of the abandoned water well plugging records for our file. Summary of the monitor well abandonments are:

Sac City Soilbuilders - Abandoned monitor wells on July 1, 1998.
Monitor Well Numbers; 1, 2, 3, 6, 7, 9, 10, 11, 12, 13, 14, 17, 18.

Ware Soilbuilder - Abandoned monitor wells on July 1, 1998.
Monitor Well Numbers; 2, 3, 6, 7, 8, 14, 19.

Should you have any questions or require additional information from me, please call or write me at the above letterhead telephone number and address.

Sincerely,



Ed Cranson
Retail Safety and Environmental Manager

Enclosures:

Abandoned Water Well Plugging Records

Iowa Department of Natural Resources

**Abandoned Water Well
Plugging Record**

1. Owner:

GEO Parcel Number:

Name: I.R. Simplot Co. City: Fort Morgan State: Co.
 Address: 17199 County Rd 21 Zip: 80701 Phone: (970) 542-0034

2. Well (Cistern) Location:

 1/4 of, 1/4 of, 1/4 of, Section , Twp. N, Range West/East(circle one)
Sac County, Describe well location on property: Sac City Site

3. Description:

MW # 2
 Well depth: 17 ft Casing material: steel, (plastic), concrete, clay, brick, stone
 Depth to water: 12.7 ft (circle one)
 Casing diameter: 2 in Type of construction: drilled, driven, bored, dug, (augered)
 Yr. or decade constrd.: ? (circle one)
 Depth of casing: 17 ft Check if this is a Monitoring Well

Check if Cistern depth: ft. diameter: ft.

I certify this well has been plugged as required by rule 567-39.8 of the Iowa Administrative Code (IAC). I agree to provide any additional information the county or department may need concerning this well.

Signature of Owner: Ed Connor, Eric Mays Date Plugged: 7-1-98

If plugged by certified well contractor, complete this box:

I have plugged this well as required by rule 567-39.8 of the Iowa Administrative Code (IAC).

Signature of Contractor: Nick Heridge Cert. No. 40480

OR, If plugged by well owner, complete this box:

The property owner has plugged this well following requirements in rule 567-39.8 of the Iowa Administrative Code with the oversight and assistance of the designated county agent.

Signature of County Agent: Date Approved:

Eligible for Grants-to-Counties cost share: YES NO (Determined by County Agent)

Complete one form for each well plugged and submit within 30 days to the local county agent:

or, only if no county agent is available, to:

Water Supply Section
Department of Natural Resources
900 East Grand Avenue
Des Moines, IA 50319-0034

Iowa Department of Natural Resources

**Abandoned Water Well
Plugging Record**

1. Owner:

GEO Parcel Number:

Name: T.R. Simplot Co. City: Fort Morgan State: Co.
Address: 17199 County Rd 21 Zip: 80701 Phone: (970) 542-0034

2. Well (Cistern) Location:

 1/4 of, 1/4 of, 1/4 of, Section , Twp. N, Range West/East(circle one)
Sac County, Describe well location on property: Sac City Site

3. Description:

MW # 3
Well depth: 21.44 ft Casing material: steel, plastic, concrete, clay, brick, stone
Depth to water: 8.25 ft (circle one)
Casing diameter: 2 in Type of construction: drilled, driven, bored, dug, augered
Yr. or decade constrd.: ? (circle one)
Depth of casing: 22 ft Check if this is a Monitoring Well

Check if Cistern depth: ft. diameter: ft.

I certify this well has been plugged as required by rule 567-39.8 of the Iowa Administrative Code (IAC). I agree to provide any additional information the county or department may need concerning this well.

Signature of Owner: [Signature] Date Plugged: 7-1-98

If plugged by certified well contractor, complete this box:

I have plugged this well as required by rule 567-39.8 of the Iowa Administrative Code (IAC).

Signature of Contractor: [Signature] Cert. No. 40480

OR, If plugged by well owner, complete this box:

The property owner has plugged this well following requirements in rule 567-39.8 of the Iowa Administrative Code with the oversight and assistance of the designated county agent.

Signature of County Agent: Date Approved:

Eligible for Grants-to-Counties cost share: YES NO (Determined by County Agent)

Complete one form for each well plugged and submit within 30 days to the local county agent:

or, only if no county agent is available, to:

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Department of Natural Resources
900 East Grand Avenue
Des Moines, IA 50319-0034

Iowa Department of Natural Resources

Abandoned Water Well
Plugging Record

1. Owner:

GEO Parcel Number:

Name: I.R. Simplot Co. City: Fort Morgan State: Co.
Address: 17199 County Rd 21 Zip: 80701 Phone: (970) 542-0034

2. Well (Cistern) Location:

 1/4 of, 1/4 of, 1/4 of, Section , Twp. N, Range West/East(circle one)
Sac County, Describe well location on property: Sac City Site

3. Description:

MW # 2

Well depth: 37 ft Casing material: steel, (plastic) concrete, clay, brick, stone
Depth to water: 18 ft (circle one)
Casing diameter: 2 in Type of construction: drilled, driven, bored, dug, (augered)
Yr. or decade constrd.: ? (circle one)
Depth of casing: 37 ft Check if this is a Monitoring Well

Check if Cistern depth: ft. diameter: ft.

I certify this well has been plugged as required by rule 567-39.8 of the Iowa Administrative Code (IAC). I agree to provide any additional information the county or department may need concerning this well.

Signature of Owner: [Signature] Date Plugged: 7-1-98

If plugged by certified well contractor, complete this box:

I have plugged this well as required by rule 567-39.8 of the Iowa Administrative Code (IAC).

Signature of Contractor: [Signature] Cert. No. 40480

OR, if plugged by well owner, complete this box:

The property owner has plugged this well following requirements in rule 567-39.8 of the Iowa Administrative Code with the oversight and assistance of the designated county agent.

Signature of County Agent: Date Approved:

Eligible for Grants-to-Counties cost share: YES NO (Determined by County Agent)

Complete one form for each well plugged and submit within 30 days to the local county agent:

or, only if no county agent is available, to:

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Department of Natural Resources
900 East Grand Avenue
Des Moines, IA 50319-0034

Iowa Department of Natural Resources

**Abandoned Water Well
Plugging Record**

1. Owner:

GEO Parcel Number:

Name: I.R. Simplot Co. City: Fort Morgan State: Co.
Address: 17199 County Rd 21 Zip: 80701 Phone: (970) 542-0034

2. Well (Cistern) Location:

 1/4 of, 1/4 of, 1/4 of, Section , Twp. N, Range West/East(circle one)
Sac County, Describe well location on property: Sac City Site

3. Description:

MW # 11
Well depth: 9.8 ft Casing material: steel, (plastic), concrete, clay, brick, stone
Depth to water: 7 ft (circle one)
Casing diameter: 2 in Type of construction: drilled, driven, bored, dug, (augered)
Yr. or decade constrd.: ? (circle one)
Depth of casing: 9.8 ft Check if this is a Monitoring Well

Check if Cistern depth: ft. diameter: ft.

I certify this well has been plugged as required by rule 567-39.8 of the Iowa Administrative Code (IAC). I agree to provide any additional information the county or department may need concerning this well.

Signature of Owner: Ed Cronson, Sac Mayor Date Plugged: 7-1-98

If plugged by certified well contractor, complete this box:

I have plugged this well as required by rule 567-39.8 of the Iowa Administrative Code (IAC).

Signature of Contractor: Nick Herdige Cert. No. 40480

OR, If plugged by well owner, complete this box:

The property owner has plugged this well following requirements in rule 567-39.8 of the Iowa Administrative Code with the oversight and assistance of the designated county agent.

Signature of County Agent: Date Approved:

Eligible for Grants-to-Counties cost share: YES NO (Determined by County Agent)

Complete one form for each well plugged and submit within 30 days to the local county agent:

or, only if no county agent is available, to:

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Department of Natural Resources
900 East Grand Avenue
Des Moines, IA 50319-0034

Iowa Department of Natural Resources

**Abandoned Water Well
Plugging Record**

1. Owner:

GEO Parcel Number:

Name: I.R. Simplot Co. City: Fort Morgan State: Co.
Address: 17199 County Rd 21 Zip: 80701 Phone: (970) 542-0034

2. Well (Cistern) Location:

 1/4 of, 1/4 of, 1/4 of, Section , Twp. N, Range West/East(circle one)
Sac County, Describe well location on property: Sac City Site

3. Description:

MW # 13
Well depth: 9.8 ft Casing material: steel, (plastic), concrete, clay, brick, stone
Depth to water: 9 ft (circle one)
Casing diameter: 2 in Type of construction: drilled, driven, bored, dug, (augered)
Yr. or decade constrd.: ? (circle one)
Depth of casing: 9.8 ft Check if this is a Monitoring Well

Check if Cistern depth: ft. diameter: ft.

I certify this well has been plugged as required by rule 567-39.8 of the Iowa Administrative Code (IAC). I agree to provide any additional information the county or department may need concerning this well.

Signature of Owner: [Signature] Date Plugged: 7-1-98

If plugged by certified well contractor, complete this box:

I have plugged this well as required by rule 567-39.8 of the Iowa Administrative Code (IAC).

Signature of Contractor: [Signature] Cert. No. 40480

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The property owner has plugged this well following requirements in rule 567-39.8 of the Iowa Administrative Code with the oversight and assistance of the designated county agent.

Signature of County Agent: Date Approved:

Eligible for Grants-to-Counties cost share: YES NO (Determined by County Agent)

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900 East Grand Avenue
Des Moines, IA 50319-0034

Iowa Department of Natural Resources

**Abandoned Water Well
Plugging Record**

1. Owner:

GEO Parcel Number:

Name: I.R. Simplot Co. City: Fort Morgan State: Co.
 Address: 17199 Courty Rd 21 Zip: 80701 Phone: (970) 542-0034

2. Well (Cistern) Location:

 1/4 of, 1/4 of, 1/4 of, Section , Twp. N, Range West/East(circle one)
Sac County, Describe well location on property: Sac City Site

3. Description:

MW # 14
 Well depth: 16 ft Casing material: steel, (plastic) concrete, clay, brick, stone
 Depth to water: 16 ft (circle one)
 Casing diameter: 2 in Type of construction: drilled, driven, bored, dug, (augered)
 Yr. or decade constrd.: ? (circle one)
 Depth of casing: 16 ft Check if this is a Monitoring Well

Check if Cistern depth: ft. diameter: ft.

I certify this well has been plugged as required by rule 567-39.8 of the Iowa Administrative Code (IAC). I agree to provide any additional information the county or department may need concerning this well.

Signature of Owner: [Signature] Date Plugged: 7-1-98

If plugged by certified well contractor, complete this box:

I have plugged this well as required by rule 567-39.8 of the Iowa Administrative Code (IAC).
 Signature of Contractor: Nick Heridge Cert. No. 40480

OR, If plugged by well owner, complete this box:

The property owner has plugged this well following requirements in rule 567-39.8 of the Iowa Administrative Code with the oversight and assistance of the designated county agent.

Signature of County Agent: Date Approved:

Eligible for Grants-to-Counties cost share: YES NO (Determined by County Agent)

Complete one form for each well plugged and submit within 30 days to the local county agent:

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**Abandoned Water Well
Plugging Record**

1. Owner:

GEO Parcel Number:

Name: I.R. Simplot Co. City: Fort Morgan State: Co.
Address: 17199 County Rd 21 Zip: 80701 Phone: (970) 542-0034

2. Well (Cistern) Location:

 1/4 of, 1/4 of, 1/4 of, Section , Twp. N, Range West/East(circle one)
Sac County, Describe well location on property: Sac City Site

3. Description:

MW# 17
Well depth: 13 ft Casing material: steel, (plastic), concrete, clay, brick, stone
Depth to water: 13 ft (circle one)
Casing diameter: 2 in Type of construction: drilled, driven, bored, dug, (augered)
Yr. or decade constrd.: ? (circle one)
Depth of casing: 13 ft Check if this is a Monitoring Well

Check if Cistern depth: ft. diameter: ft.

I certify this well has been plugged as required by rule 567-39.8 of the Iowa Administrative Code (IAC). I agree to provide any additional information the county or department may need concerning this well.

Signature of Owner: [Signature] Date Plugged: 7-1-98

If plugged by certified well contractor, complete this box:

I have plugged this well as required by rule 567-39.8 of the Iowa Administrative Code (IAC).

Signature of Contractor: [Signature] Cert. No. 40480

OR, If plugged by well owner, complete this box:

The property owner has plugged this well following requirements in rule 567-39.8 of the Iowa Administrative Code with the oversight and assistance of the designated county agent.

Signature of County Agent: Date Approved:

Eligible for Grants-to-Counties cost share: YES NO (Determined by County Agent)

Complete one form for each well plugged and submit within 30 days to the local county agent:

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