W	GGING	G RECORD Form WWC-5P				KSA 82a-1212	ID No. MW-8				
1 LOCATIO	ON OF WAT	TER WELI	L: Fr	raction				Section Number	Township Numbe	r Range Number	
County:	Wyaı	ndotte		SE 1	∕₄ SI	E 1/4	SW 1/2	4 9	11	25-East	
Distance and direction from nearest town or city street address of well if located within city?											
1230 Central Avenue, Kansas City, Kansas 2 WATER WELL OWNER: Phil Sedlock											
RR#, St. Address, Box# 1230 Central Avenue Board of Agriculture, Division of Water Resources											
City, State,	ansas	s City, Kansas 66102 Application Number:									
3 MARK W "X" IN SE	ELL'S LOC	ATON W	TH AN					5 8.5 ft.			
	N	۸.									
	: 1		-	WELL'S STATIC WATER LEVEL 40.60 ft.							
		İ		WEL	L WAS U	ISED AS:					
N	iw	NE	┨ │								
	! 	-			1 Dom			blic Water Supply	Dewat	•	
w	 	- -	Е			ation dlot		Field Water Supply wn and Garden (domes	_	-	
		į			4 Indu			Conditioning			
S	sw —	_ SE	1	Was a ch	emical/ba	acteriologi	cal sample:	submitted to Departme	nt? Yes	No X	
Was a chemical/bacteriological sample submitted to Department? Yes No X If yes, mo/day/yr sample was submitted											
Water Well Disinfected: Yes No X											
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 2.375 in. Was casing pulled? Yes No x If yes, how much? N/A											
Online being diameter Link own Cooling plugged; cooling removed to death of 2' PTOC											
Casing height above or land surface Unknown in. Casing plugged; casing removed to depth of 3' BTOC.											
6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other Soils											
Grout Plug Intervals From 58.5 ft. to 3.0 ft. From 3.0 ft. to 0.0 ft. From ft. to ft.											
What is the nearest source of possible contamination:											
							\odot	1.4	40. Other (!!	5 - 5 - 1 A	
	tic tank ver lines			Seepage Pit privy	pit			i storage (former) ilizer storage	16 Other (specif	y below)	
1	ertight sew	er lines		Sewage la	agoon			cticide storage			
1							ndoned water well				
5 Ces	s Pool		10	Livestock	pens		15 Oil v	vell/ Gas well			
Direction from well? North-northwest How many feet? 220											
FROM	ТО	CODE		PLUGGING MATERIALS							
0.0						CONTON	INTERNALO				
	3.0 58.5 Bente										
0.0	00.0		Dente	<i>////// 011</i>	ipo						
							Western				
		1									
7											
CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed											
on (mo/day/yr) 06/01/10 /and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 100/092 This Water Well Record was completed on (mo/day/yr)											
Water Well Contractor's License No											
by (signature)			under ti	I ALA	L			July 901 11003,		
			e fill in	hlanke	and circ	le the co	rrect answ	vers. Send three co	nies to Kansas Den	artment of Health and	
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	Send one to Water Well Owner and retain one for your records.										