

MW-12

WATER WELL PLUGGING RECORD

Form WWC-5P

KSA 82a-1212

ID NO. _____

1	LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number																								
	County: <u>Johnson</u>	<u>NW 1/4 NW 1/4 SE 1/4</u>	<u>30</u>	<u>13 S</u>	<u>24</u> EAW																								
Distance and direction from nearest town or city street address of well if located within city? <u>600 N. Pagers Rd. Olathe, KS - well located in grass field in tree line</u>																													
2	WATER WELL OWNER: <u>Honeywell International, Inc.</u> <u>23500 W. 105th Street</u> RR #, St. Address, Box #: _____ City, State, ZIP Code : <u>Olathe, KS 66061</u>																												
3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX: 			4 DEPTH OF WELL <u>8.88</u> ft. WELL'S STATIC WATER LEVEL <u>3.91</u> ft. WELL WAS USED AS: 1 Domestic 2 Irrigation 3 Feedlot 4 Industrial 5 Public Water Supply 6 Oil Field Water Supply 7 Domestic (Lawn & Garden) 8 Air Conditioning 9 Dewatering <u>10</u> Monitoring Well 11 Injection Well 12 Other _____																										
			Was a chemical / bacteriological sample submitted to Department? Yes _____ No <u>X</u> If yes, mo/day/yr sample was submitted _____ Water Well Disinfected: Yes _____ No <u>X</u>																										
5	TYPE OF BLANK CASING USED: 1 Steel <u>2</u> PVC 3 RMP (SR) 4 ABS 5 Wrought 6 Asbestos-Cement 7 Fiberglass 8 Concrete Tile 9 Other (Specify below) _____ Blank casing diameter <u>1</u> in. Was casing pulled? Yes <u>X</u> No _____ If yes, how much <u>all</u> Casing height above or below land surface <u>24</u> in.																												
6	GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout <u>3</u> Bentonite 4 Other _____ GROUT PLUG INTERVALS: From <u>0.88</u> ft. to <u>2</u> ft., From _____ ft. to _____ ft., From _____ to _____ ft. What is the nearest source of possible contamination: 1 Septic tank 2 Sewer lines 3 Watertight sewer lines 4 Lateral lines 5 Cess pool 6 Seepage pit 7 Pit privy 8 Sewage lagoon 9 Feedyard 10 Livestock pens 11 Fuel storage 12 Fertilizer storage 13 Insecticide storage 14 Abandoned water well 15 Oil well/Gas well <u>16</u> Other (specify below) <u>Manufacturing Facility</u> Direction from well? _____ How many feet? _____																												
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:10%;">FROM</th> <th style="width:10%;">TO</th> <th style="width:80%;">PLUGGING MATERIALS</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">0</td> <td style="text-align: center;">2</td> <td><u>Topsoil</u></td> </tr> <tr> <td style="text-align: center;">2</td> <td style="text-align: center;">8.88</td> <td><u>Bentonite grout</u></td> </tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> </tbody> </table>						FROM	TO	PLUGGING MATERIALS	0	2	<u>Topsoil</u>	2	8.88	<u>Bentonite grout</u>															
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7	CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) <u>12-08</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>710</u> This Water Well Record was completed on (mo/day/year) <u>4-13-08</u> under the business name of <u>Below Ground Surface, Inc.</u> by (signature) <u>[Signature]</u>																												

INSTRUCTIONS: Use typewriter or ball point pen. Please press firmly and print clearly. Please fill in blanks, underline or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Ste. 420, Topeka, Kansas 66612-1367. Telephone: 785/296-5522. Send one to Water Well Owner and retain one for your records.