WATER WE	11 011	ICCINC	DECODE
VVAIER VVE		ハコしつけりしつ	REGURL

Form WWC-5P

KSA 82a-1212

ID No.

[4](004				GILLOUIL	, '	01111 77770	-01	NOA OZA-1		- 10 NO.	
LOCAT	TON OF WA	HER WELL	_: F	raction				Section Nu	mber	Township Number	
County:	Sedgwic	k		SW 1/4	NE	1/4 NV	N 1/4	36		26	01 E
Distance and direction from nearest town or city street address of well if located within city? 5252 E. 36 th St. North, Wichita											
	R WELL OW		·	Boeing (Compan	ıy					
	Address, B			PO Box	_	•			Board o	of Agriculture, Divisio	n of Water Resource
City, Stat	e, ZIP Cod	e :		Wichita	KS 672	27-7730				tion Number:	
MARK	WELL'S LO	CATON WI	TH AN	1 4							
"X" IN S	SECTION BO	OX:		DEPTH	1 OF WEL	L	2	8	ft.	,	
	N			WEII'	S STATIC	WATERIE	VEI	10.83	ft		
		į	1	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	0 0 17 11 10	****		:5:5:5:	'		
	√x I	1		WELL	WAS USE	D AS:		•			
	N ^ -	NE	ł								
	}	}			1 Domes	tic	5 Public	c Water Supply	,	9 Dewater	
w			E	1	_			eld Water Supp	-	10 Monitorir	
	i	į		ł	3 Feedlot			and Garden (d	lomestic)		
					4 Industri	ai	8 Air Co	onditioning		12 Other	
	sw	SE	1	Was a cher	nical/bacte	eriological sa	mple sui	bmitted to Depa	artment?	Yes	No X
	1	!		If yes, mo/d	ay/yr sam	ple was subr	mitted				
<u> </u>	<u> </u>		J	Water Well		d: Yes	-	No X			
	S										
	OF BLANK C								,		
1 Stee		3 RMP (•					9 C			
Blook of	oina diamat	4 ABC	:	o Aspe	stos-ceme	ent 8 Con	ncrete i ii	e If		>h	
1									now muc	л 	
Casing h	neight above	or below la	and su	rface	240	in. Ove	erdrille	d 20 feet			
6 GPOU	T DI LIC MA	TEDIAL .	1 Noo	t coment	Comoni	t arout	2 Pani	maita	4 Other		
1 01.00	I FLOG MA	IENIAL.	1 1464	i cement .	2 Cemen	i giout (3 Bent	Office	4 Other		
Grout F	Plug Intervals	s From	1	ft. to	28	ft. From		ft. to		ft. From	ft. to ft.
\M/bat is	the negree!	course of	naccih	le contamina	tion:						
7 VIII CIS	tile ilealest	Source or	hossin	ile Contamina	uon.						
1 Se	ptic tank		6	Seepage pit		11	Fuel st	orage		16 Other (specify b	elow)
2 Se	wer lines			Pit privy		12	2 Fertilize	er storage			
3 Wa	atertight sew	er lines	8	Sewage lag	oon	13	Insectio	cide storage			
4 Lat	teral lines						Abando				
5 Ce	ss Pool		10	Livestock pe	ens	15	Oil well	/ Gas well			
D: " (210			•			_				
Direction fr	om well?		·			How	many fe	et?			
FROM	ТО	CODE			PLUGG	ING MATER	IALS				•
0	1		Soil								
		 									
11	28	ļ	sento	onite		····					
	•										
						,					
		+									
7 CON	TRACTOR'	SORIAN		MED'S CED	TIEIC ATIO	N: This wat	tor wall s	was plugged u	nder my	jurisdiction and was o	ompleted
	mo/day/yr)	2 01/ E414	الالا	8-7-03					_	st of my knowledge	
1							ia uns re			•	
wate	er Well Cor		Licens	/		531		H		ecord was completed	
		12-03		_ under the	business	s name of (VZ	\#	eotec	hnical Services, I	nc.
by (signature) (Muser VA Jan											
INST	RUCTION	S: Please	fill in	blanks and	d circle to	he correct	answer	s. Send thre	e copie	s to Kansas Depart	ment 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 one to Water Well Owner and retain one for your records.											