

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: Sedgwick		SE ¼ SE ¼ NE ¼	17	26	01 East																																				
Distance and direction from nearest town or city street address of well if located within city? 5855 N. Broadway																																									
2 WATER WELL OWNER: RR#, St. Address, Box # City, State, ZIP Code :		Koch Industries 5855 N. Broadway Wichita, KS 67204 Board of Agriculture, Division of Water Resources Application Number:																																							
3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF WELL 26.42 ft.																																							
N <table border="1" style="margin: auto; border-collapse: collapse;"> <tr><td></td><td></td><td></td></tr> <tr><td>NW</td><td></td><td>NE</td></tr> <tr><td></td><td style="text-align: center;">X</td><td></td></tr> <tr><td>SW</td><td></td><td>SE</td></tr> </table> S					NW		NE		X		SW		SE	WELL'S STATIC WATER LEVEL 14.43 ft.																											
		NW		NE																																					
			X																																						
SW		SE																																							
WELL WAS USED AS:																																									
1 Domestic 2 Irrigation 3 Feedlot 4 Industrial 5 Public Water Supply 6 Oil Field Water Supply 7 Lawn and Garden (domestic) 8 Air Conditioning 9 Dewatering 10 Monitoring Well 11 Injection Well 12 Other																																									
		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 2 PVC 3 RMP (SR) 4 ABC 5 Wrought 6 Asbestos-Cement 7 Fiberglass 8 Concrete Tile 9 Other (specify below) Blank casing diameter 2 in. Was casing pulled? Yes ___ No X If yes, how much _____ Casing height above or below land surface 36 in. Overdrilled to 3 feet below ground surface																																									
6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other _____																																									
Grout Plug Intervals From 3 ft. to 26.42 ft. From _____ ft. to _____ ft. From _____ ft. 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 16 Other (specify below) _____																																									
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:10%;">CODE</th> <th style="width:70%;">PLUGGING MATERIALS</th> </tr> </thead> <tbody> <tr> <td>0</td> <td>3</td> <td></td> <td>Concrete</td> </tr> <tr> <td>3</td> <td>26.42</td> <td></td> <td>Bentonite</td> </tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> </tbody> </table>						FROM	TO	CODE	PLUGGING MATERIALS	0	3		Concrete	3	26.42		Bentonite																								
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7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/yr) 12-21-04 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 531 This Water Well Record was completed on (mo/day/yr) 1-19-05 under the business name of Geotechnical Services, Inc. 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, 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.																																									