

# 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: <b>Sedgwick</b>		<b>SE 1/4 SE 1/4 NE 1/4</b>	<b>17</b>	<b>26</b>	<b>01 East</b>																																				
Distance and direction from nearest town or city street address of well if located within city? <b>5855 N. Broadway</b>																																									
2 WATER WELL OWNER:		Koch Industries																																							
RR#, St. Address, Box #		5855 N. Broadway																																							
City, State, ZIP Code :		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 <b>25.43</b> ft.																																							
<div style="text-align: center;">N</div> <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>W</td><td></td><td>X</td></tr><tr><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td></tr><tr><td></td><td>SW</td><td>SE</td></tr><tr><td></td><td></td><td></td></tr><tr><td></td><td></td><td>S</td></tr></table>					NW		NE	W		X								SW	SE						S	WELL'S STATIC WATER LEVEL <b>14.55</b> ft.															
		NW		NE																																					
		W		X																																					
	SW	SE																																							
		S																																							
		WELL WAS USED AS:																																							
		<div style="display: flex; justify-content: space-between;"><div>1 Domestic</div><div>5 Public Water Supply</div><div>9 Dewatering</div></div>																																							
		<div style="display: flex; justify-content: space-between;"><div>2 Irrigation</div><div>6 Oil Field Water Supply</div><div>10 Monitoring Well</div></div>																																							
		<div style="display: flex; justify-content: space-between;"><div>3 Feedlot</div><div>7 Lawn and Garden (domestic)</div><div>11 Injection Well</div></div>																																							
		<div style="display: flex; justify-content: space-between;"><div>4 Industrial</div><div>8 Air Conditioning</div><div><b>12 Other</b></div></div>																																							
		Was a chemical/bacteriological sample submitted to Department? Yes ___ No <b>X</b>																																							
		If yes, mo/day/yr sample was submitted _____																																							
		Water Well Disinfected: Yes ___ No <b>X</b>																																							
5 TYPE OF BLANK CASING USED:																																									
<div style="display: flex; justify-content: space-between;"><div>1 Steel</div><div>3 RMP (SR)</div><div>5 Wrought</div><div>7 Fiberglass</div><div>9 Other (specify below)</div></div>																																									
<div style="display: flex; justify-content: space-between;"><div><b>2 PVC</b></div><div>4 ABC</div><div>6 Asbestos-Cement</div><div>8 Concrete Tile</div><div></div></div>																																									
Blank casing diameter <b>2</b> in. Was casing pulled? Yes ___ No <b>X</b> If yes, how much _____																																									
Casing height above or below land surface <b>36</b> in. <b>Overdrilled to 3 feet below ground surface</b>																																									
6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout <b>3 Bentonite</b> 4 Other _____																																									
Grout Plug Intervals From <b>3</b> ft. to <b>25.43</b> ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.																																									
What is the nearest source of possible contamination:																																									
<div style="display: flex; justify-content: space-between;"><div>1 Septic tank</div><div>6 Seepage pit</div><div>11 Fuel storage</div><div>16 Other (specify below)</div></div>																																									
<div style="display: flex; justify-content: space-between;"><div>2 Sewer lines</div><div>7 Pit privy</div><div>12 Fertilizer storage</div><div></div></div>																																									
<div style="display: flex; justify-content: space-between;"><div>3 Watertight sewer lines</div><div>8 Sewage lagoon</div><div>13 Insecticide storage</div><div></div></div>																																									
<div style="display: flex; justify-content: space-between;"><div>4 Lateral lines</div><div>9 Feedyard</div><div>14 Abandoned water well</div><div></div></div>																																									
<div style="display: flex; justify-content: space-between;"><div>5 Cess Pool</div><div>10 Livestock pens</div><div>15 Oil well/ Gas well</div><div></div></div>																																									
Direction from well? _____ How many feet? _____																																									
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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) <b>12-22-04</b> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <b>531</b> This Water Well Record was completed on (mo/day/yr) <b>1-19-05</b> under the business name of <b>Geotechnical Services, Inc.</b> by (signature) <i>[Signature]</i>																																									
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.																																									