

# 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:		<b>Koch Industries</b>																																							
RR#, St. Address, Box #		<b>5855 N. Broadway</b>																																							
City, State, ZIP Code :		<b>Wichita, KS 67204</b>																																							
		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>26</b> ft.																																							
<div style="text-align: center;">N <table border="1" style="margin: auto; border-collapse: collapse;"><tr><td colspan="2">NW</td><td colspan="2">NE</td></tr><tr><td colspan="2" rowspan="2" style="text-align: center; vertical-align: middle;"><b>X</b></td><td colspan="2">SE</td></tr><tr><td colspan="2">SW</td></tr></table> S</div>		NW		NE		<b>X</b>		SE		SW		WELL'S STATIC WATER LEVEL _____ ft.																													
		NW		NE																																					
		<b>X</b>		SE																																					
				SW																																					
WELL WAS USED AS:																																									
		1 Domestic                      5 Public Water Supply                      9 Dewatering																																							
		2 Irrigation                      6 Oil Field Water Supply <b>10 Monitoring Well</b>																																							
		3 Feedlot                      7 Lawn and Garden (domestic)                      11 Injection Well																																							
		4 Industrial                      8 Air Conditioning                      12 Other _____																																							
		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:																																									
1 Steel                      3 RMP (SR)                      5 Wrought                      7 Fiberglass                      9 Other (specify below)																																									
<b>2 PVC</b> 4 ABC                      6 Asbestos-Cement                      8 Concrete Tile																																									
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>240</b> in. <b>Overdrilled to 20 feet below ground surface</b>																																									
6 GROUT PLUG MATERIAL:      1 Neat cement <b>2 Cement grout</b> 3 Bentonite      4 Other _____																																									
Grout Plug Intervals      From <b>0</b> ft. to <b>20</b> ft.      From _____ ft. to _____ ft.      From _____ ft. to _____ ft.																																									
What is the nearest source of possible contamination:																																									
1 Septic tank                      6 Seepage pit                      11 Fuel storage                      16 Other (specify below)																																									
2 Sewer lines                      7 Pit privy                      12 Fertilizer storage																																									
3 Watertight sewer lines                      8 Sewage lagoon                      13 Insecticide storage																																									
4 Lateral lines                      9 Feedyard                      14 Abandoned water well																																									
5 Cess Pool                      10 Livestock pens                      15 Oil well/ Gas well																																									
Direction from well? _____      How many feet? _____																																									
<table border="1" style="width:100%; border-collapse: collapse;"><thead><tr><th style="width:15%;">FROM</th><th style="width:15%;">TO</th><th style="width:15%;">CODE</th><th style="width:55%;">PLUGGING MATERIALS</th></tr></thead><tbody><tr><td><b>0</b></td><td><b>20</b></td><td></td><td><b>Cement Grout</b></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><tr><td> </td><td> </td><td> </td><td> </td></tr></tbody></table>						FROM	TO	CODE	PLUGGING MATERIALS	<b>0</b>	<b>20</b>		<b>Cement Grout</b>																												
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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.																																									