

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 1/4 SE 1/4 NE 1/4	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: 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: N <table border="1" style="border-collapse: collapse; text-align: center;"> <tr><td></td><td></td><td></td></tr> <tr><td>NW</td><td></td><td>NE</td></tr> <tr><td></td><td></td><td></td></tr> <tr><td>SW</td><td></td><td>SE</td></tr> <tr><td></td><td></td><td></td></tr> </table> S W X E							NW		NE				SW		SE																								
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4	DEPTH OF WELL 20 ft. WELL'S STATIC WATER LEVEL _____ ft. 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 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (specify below) 2 PVC 4 ABC 6 Asbestos-Cement 8 Concrete Tile Blank casing diameter 2 in. Was casing pulled? Yes _____ No X If yes, how much _____ Casing height above or below land surface 0.0 in. Overdrilled to 20 feet below ground surface																																							
6	GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other _____ Grout Plug Intervals From 0 ft. to 20 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 style="text-align: center;">0</td> <td style="text-align: center;">20</td> <td></td> <td>Cement Grout</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	0	20		Cement Grout																												
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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) 12-22-04 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) <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.																																								