

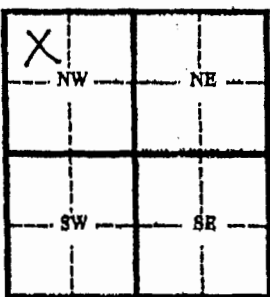
WATER WELL PLUGGING RECORD

Form WWC-5P

KSA 82a-1212

ID No.

A51-2

1 LOCATION OF WATER WELL: Fraction <u>NW 1/4 NW 1/4 NW 1/4</u> Section Number <u>19</u> Township Number <u>26S</u> Range Number <u>01E</u>																																	
County: <u>Sedgwick</u> Distance and direction from nearest town or city street address of well if located within city? <u>2435 W. 53rd Street</u>																																	
2 WATER WELL OWNER: <u>JAMES T ROSS</u> RR#, St. Address, Box # <u>825 E 2nd</u> Board of Agriculture, Division of Water Resources City, State, ZIP Code <u>Wichita KS 67202</u> Application Number:																																	
3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX: <div style="text-align: center;">  </div>	4 DEPTH OF WELL <u>21.8</u> ft. WELL'S STATIC WATER LEVEL <u>~14</u> ft. WELL WAS USED AS: <div style="display: flex; justify-content: space-between;"> <div> 1 Domestic 2 Irrigation 3 Feedlot 4 Industrial </div> <div> 5 Public Water Supply 6 Oil Field Water Supply 7 Lawn and Garden (domestic) 8 Air Conditioning </div> <div> 9 Dewatering 10 Monitoring Well 11 Injection Well 12 Other </div> </div> Was a chemical/bacteriological sample submitted to Department? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If yes, no/day/yr sample was submitted _____ Water Well Disinfected: Yes <input type="checkbox"/> No <input type="checkbox"/>																																
5 TYPE OF BLANK CASING USED: 1 Steel 3 RMP (SR) 5 Wrought 7 Fiberglass 8 Other (specify below) 2 PVC 4 ABC 6 Asbestos-Cement 8 Concrete Tile Blank casing diameter <u>2</u> in. Was casing pulled? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> If yes, how much <u>Overdrilled to 20'</u> Casing height above or below land surface _____ in.																																	
6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other _____ Grout Plug Intervals From <u>0</u> ft. to <u>21.8</u> 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 2 Sewer lines 3 Watertight sewer lines 4 Lateral lines 5 Cess Pool </div> <div> 6 Seepage pit 7 Pit privy 8 Sewage lagoon 9 Feedyard 10 Livestock pens </div> <div> 11 Fuel storage 12 Fertilizer storage 13 Insecticide storage 14 Abandoned water well 15 Oil well/ Gas well </div> <div> 16 Other (specify below) <u>Old Gas Station on Site</u> </div> </div> Direction from well? _____ How many feet? _____																																	
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>FROM</th> <th>TO</th> <th>CODE</th> <th>PLUGGING MATERIALS</th> </tr> </thead> <tbody> <tr> <td><u>0</u></td> <td><u>21.8</u></td> <td></td> <td><u>Bentonite</u></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	<u>0</u>	<u>21.8</u>		<u>Bentonite</u>																								
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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) <u>9/5/06</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>554</u> This Water Well Record was completed on (mo/day/yr) <u>10/4/06</u> under the business name of <u>Bluestem Env. Engineering/Woofler</u> by (signature) <u>[Signature]</u>																																	
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: 785-296-3585. Send one to Water Well Owner and retain one for your records.																																	

RECEIVED

JAN 08 2009

BUREAU OF WATER