

WATER WELL PLUGGING RECORD

Form WWC-5P

KSA 82a-1212

ID No.

MW-12

1 LOCATION OF WATER WELL: Fraction		Section Number		Township Number		Range Number																																					
County: <u>Sedgwick</u> NW 1/4 NW 1/4 NW 1/4		19		26S		01E																																					
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: RR#, St. Address, Box # <u>JAMES T ROSS 825 E 2nd Wichita KS 67202</u>				Board of Agriculture, Division of Water Resources Application Number:																																							
3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:				4 DEPTH OF WELL <u>20.3</u> ft.																																							
<div style="display: flex; align-items: center;"> <div style="margin-right: 10px;">X</div> <table border="1" style="border-collapse: collapse; text-align: center;"> <tr><td colspan="2">N</td></tr> <tr><td>X</td><td></td></tr> <tr><td>NW</td><td>NE</td></tr> <tr><td colspan="2">W</td></tr> <tr><td></td><td></td></tr> <tr><td>SW</td><td>SE</td></tr> <tr><td colspan="2">E</td></tr> </table> </div>				N		X		NW	NE	W				SW	SE	E		WELL'S STATIC WATER LEVEL <u>~14</u> ft.																									
				N																																							
X																																											
NW	NE																																										
W																																											
SW	SE																																										
E																																											
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 <input type="checkbox"/> No <input checked="" type="checkbox"/>																																											
If yes, mo/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 9 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>Reamed 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>20.3</u> 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>FROM</th> <th>TO</th> <th>CODE</th> <th>PLUGGING MATERIALS</th> </tr> </thead> <tbody> <tr> <td>0</td> <td>20.3</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> <tr><td> </td><td> </td><td> </td><td> </td></tr> </tbody> </table>								FROM	TO	CODE	PLUGGING MATERIALS	0	20.3		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) <u>9/6/06</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</u> by (signature) <u>[Signature]</u> <u>Woofler</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: 785-298-3565. Send one to Water Well Owner and retain one for your records.																																											

RECEIVED

JAN 08 2009

BUREAU OF WATER