W	ATER WELL PLUGGING RECORD Form WWO	-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 SW 1		
Distance and direction from nearest town or city street address of well if located within city?			
2100 E. 37TH ST. NORTH, WICHITA, KS 67219			
2	WATER WELL OWNER: CHEVRON EMC	Global Positioning Systems (decimal degrees, min. of 4 digits Latitude: 37. 75 a 335°	
	RR#, St. Address, Box #: 6111 BOLLINGER CANYON R		
	City, State ZIP Code: BR11, Room 3424	Datum: h)GS 84	
	SAN RAMON, CA 94583	Data Collection Method: DIGITAL MAP (GOOGLE EARTH)	
3	MARK WELL'S LOCATION 4 DEPTH OF WELL _	20.4 ft.	
WITH AN "X" IN SECTION BOX: WELL'S STATIC WATER LEVEL ft			
	BOX: WELL'S STATIC WA	TER LEVEL	
	WELL WAS USED A	S:	
	NW NE NE	5 D 18 W - G - 1	
	1 Domestic 2 Irrigation	5 Public Water Supply 6 Oil Field Water Supply 10 Monitoring	
W	E 3 Feedlot	7 Domestic (Lawn & Garden) 11 Injection Well	
	SW SE 4 Industrial	8 Air Conditioning 12 Other	
	Was a chemical/bacter	ological sample submitted to Department? Yes No 🗸	
	S Was a chemical cacter	orogram sample sacrification beparament. Tes110	
5 TYPE OF BLANK CASING USED:			
1 Steel 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (Specify below)			
	2 PVC 4 ABS 6 Asbestos-Cement 8 Concrete Tile		
	Blank casing diameter in. Was casing pulled? Yes No If yes, how much ALC		
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 ft. to ft., From ft. to ft., From 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 Direction from well? ON-SIFE			
5 Cess pool 10 Livestock pens 15 Oil well/Gas well How many feet? ON - SITE			
	FROM TO PLUGGING MATERIALS	FROM TO PLUGGING MATERIALS	
	TROM TO TECOGINO MATERIALS	ROW TO TEOGRAM MATERIALS	
		(REDI JOB # 102028)	
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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/year) 12/18/10 and this record is true to the best of my knowledge and belief. Kansas Water			
completed on (mo/day/year) 12/18/10 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 788. This Water Well Record was completed on (mo/day/year) 1/3//11 under the			
busi		by (signature)	
INSTRUCTIONS: Use typewriter or ballpoint pen. Please press firmly and print clearly. Please fill in blanks, underline or circle the			
	ect answers. Send top three copies to Kansas Department of Health		
Jackson St., Ste. 420, Topeka, Kansas 66612-1367. Telephone: 785/296-5522. Send one to Water Well Owner and retain one for your			
	records. Visit us at http://www.kdheks.gov/geo/waterwells.		

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