

1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: <u>SEDGWICK</u>	<u>1/4 SW 1/4 NE 1/4 NW 1/4</u>	<u>34</u>	T <u>26</u> S	<u>1</u> ☒ E ☐ W

Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here ☐ **FORMER UNICOL CHEMICAL DIST. FACILITY**

3600 N. HYDRAULIC ST., WICHITA, KS 67219

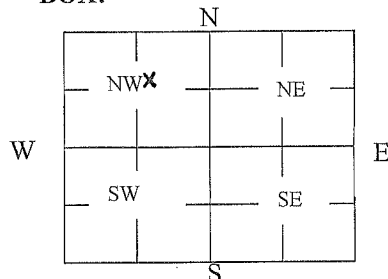
Global Positioning Systems (GPS) information:

Latitude: * (in decimal degrees)
 Longitude: * (in decimal degrees)
 Elevation: _____
 Datum: ☒ WGS84, ☐ NAD83, ☐ NAD27
 Collection Method: _____

2 WATER WELL OWNER: CHEVRON ENV. MGT. CO.
 RR#, St. Address, Box #: 6101 BOLLINGER CANYON RD.
 City, State ZIP Code: SAN RAMON, CA 94583

☐ GPS unit (Make/Model: _____)
☒ Digital Map/Photo, ☐ Topographic Map, ☐ Land Survey
 Est. Accuracy: ☐ < 3 m, ☐ 3-5 m, ☒ 5-15 m, ☐ > 15 m

3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:



4 DEPTH OF WELL ~30.5 ft.

WELL'S STATIC WATER LEVEL _____ ft

WELL WAS USED AS:

- | | | |
|-------------------------------------|---|--|
| ☐ Domestic | ☐ Public Water Supply | ☐ Dewatering |
| ☐ Irrigation | ☐ Oil Field Water Supply | ☒ Monitoring |
| ☐ Feedlot | ☐ Domestic (Lawn & Garden) | ☐ Injection Well |
| ☐ Industrial | ☐ Air Conditioning | ☐ Other _____ |

Was a chemical/bacteriological sample submitted to Department? Yes ☐ No ☐

WELL #:

R-9

5 TYPE OF BLANK CASING USED:

- ☒ Steel (15") ☐ RMP (SR) ☐ Wrought ☐ Fiberglass ☐ Other (Specify below)
☒ PVC (2") ☐ ABS ☐ Asbestos-Cement ☐ Concrete Tile

Blank casing diameter 2 5/8 in. Was casing pulled? Yes ☐ No ☒ If yes, how much _____
 Casing height above or below land surface 0 in.

6 GROUT PLUG MATERIAL:

- ☐ Neat cement ☐ Cement grout ☐ Bentonite ☒ Other NONE FOUND **WELL NOT**

Grout Plug Intervals: From _____ ft. to _____ ft., From _____ ft. to _____ ft., From _____ to _____ ft.

What is the nearest source of possible contamination:

- | | | | |
|---|---|---|--|
| ☐ Septic tank | ☐ Seepage pit | ☐ Fuel Storage | ☒ Other (specify below)
<u>UPGRADIENT SOURCE PLUMES</u> |
| ☐ Sewer lines | ☐ Pit privy | ☐ Fertilizer storage | |
| ☐ Watertight sewer lines | ☐ Sewage lagoon | ☐ Insecticide storage | |
| ☐ Lateral lines | ☐ Feedyard | ☐ Abandoned water well | |
| ☐ Cess pool | ☐ Livestock pens | ☐ Oil well/Gas well | |
- Direction from well? UNKNOWN
 How many feet? UNKNOWN

FROM	TO	PLUGGING MATERIALS	FROM	TO	PLUGGING MATERIALS
---	---	*WELL WAS NOT LOCATED			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) * 5/23/12 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) 6/25/12 under the business name of ROBERTS ENV. DRILLING, INC. by (signature) [Signature]

INSTRUCTIONS: Use typewriter or ballpoint pen. Please press firmly and print clearly. Please fill in blanks, underline or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Ste. 420, Topeka, Kansas 66612-1367. Telephone: 785/296-5524. Send one to Water Well Owner and retain one for your records. Visit us at <http://www.kdheks.gov/waterwell/index.html>.

REDI JOB #122008

Check one:

☒ White Copy ☐ Blue Copy ☐ Pink Copy