WATER WELL PLUGGING RECORD Form WWC-5P KSA 82a-1212 ID NO.								
1		SW 1/4 S	SW 1/4 SW 1/4	1/4	Number 18	Township Number T 26 S	Range Number 1	
	Street/Rural Address of Well Location; if unknown, distance & Global Positioning Systems (GPS) information:							
	direction from nearest town or intersection: If at owner's address, check here			Latitude: (in decimal degrees) Longitude: (in decimal degrees) Elevation:				
54	— 00 N. Meridian, Wichita, Kai	nsas		Datum: WGS84, NAD83, NAD27 Collection Method:				
	WATER WELL OWNER.	oral Storag		GPS unit (Make/Model:				
2	WATER WELL OWNER: Johnson's General Stores RR#, St. Address, Box #: City, State ZIP Code: PO Box 9250 Wichita, KS 67277			☐ Digital Map/Photo, ☐ Topographic Map, ☐ Land Survey				
<u></u>	City, State ZIP Code:	Est. Accuracy:						
3	MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX: N WELL'S STATIC W WELL WAS USED			ATER LEVELft				
W	W NE Domestic Irrigation Feedlot Domestic (Lawn & Garden) Injection W Other W Sw SE Was a chemical/bacteriological sample submitted to Department? Yes						oring ion Well	
5	TYPE OF BLANK CASING USED:							
	Steel RMP (SR) Wrought Concrete Tile Blank casing diameter 4 in. Was casing pulled? Yes No If yes, how much ~3ft below ground surface in.							
6 GROUT PLUG MATERIAL: Neat cement Cement grout Bentonite Other Grout Plug Intervals: From 3 ft. to 21 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) Fertilizer storage Watertight sewer lines Sewage lagoon Lateral lines Feedyard Oil well/Gas well How many feet?							
	FROM TO	PLUGGING MA	TERIALS	FROM	TO	PLUGGING	MATERIALS	
	3 21 Bento							
						MW-9		
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 2/27/14 and this record is true to the best of my knowledge and belief. K ansas Water Well Contractor's License No This Water Well Record was completed on (mo/day/year) 3/10/14 under the business name of GreenField Contractors, Inc. by (signature)								
INSTRUCTIONS: Use typewriter or ballpoint pen. Please press firmly and print clearly. Please fill in blanks, underline or circle the correct answers. Send one copy 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.								