

AS-15

1 LOCATION OF WATER WELL: County: <b>Sedgwick</b>		Fraction: <b>SE ¼ SE ¼ SE ¼</b>		Section Number <b>17</b>	Township Number <b>26S</b>	Range Number <b>1E</b>																																				
Distance and direction from nearest town or city street address of well if located within city? <b>5403 N. Broadway, Wichita, KS</b>																																										
2 WATER WELL OWNER: <b>Lewis Williams</b> RR#, St. Address, Box # <b>North Highway 56</b> City, State, ZIP Code <b>Moscow, KS</b>				Board of Agriculture, Division of Water Resources Application Number:																																						
3 MARK WELL'S LOCATION WITH AN 'X' IN SECTION BOX:		4 DEPTH OF WELL <b>27.8</b> ft.																																								
		WELL'S STATIC WATER LEVEL <b>14</b> ft.																																								
		WELL WAS USED AS:																																								
		1 Domestic                      5 Public Water Supply                      9 Dewatering 2 Irrigation                      6 Oil Field Water Supply                      10 Monitoring Well 3 Feedlot                      7 Lawn and Garden (domestic)                      11 Injection Well 4 Industrial                      8 Air Conditioning                      12 Other <input checked="" type="radio"/> Air Sparge																																								
		Was a chemical/bacteriological sample submitted to Department? <b>Yes</b> No If yes, mo/day/yr sample was submitted _____ Water Well Disinfected: <b>Yes</b> No																																								
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 <b>2</b> in.    Was casing pulled? <b>Yes</b> <input checked="" type="checkbox"/> No    If yes, how much <b>3</b> feet 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 _____ 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 style="width:10%;">FROM</th> <th style="width:10%;">TO</th> <th style="width:10%;">CODE</th> <th style="width:70%;">PLUGGING MATERIALS</th> </tr> </thead> <tbody> <tr> <td>0</td> <td>3</td> <td></td> <td>Native materials</td> </tr> <tr> <td>3</td> <td>27.8</td> <td></td> <td>Bentonite grout</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	3		Native materials	3	27.8		Bentonite grout																								
FROM	TO	CODE	PLUGGING MATERIALS																																							
0	3		Native materials																																							
3	27.8		Bentonite grout																																							
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/yr) <b>6/17/14</b> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. _____ This Water Well Record was completed on (mo/day/yr) <b>6/23/14</b> under the business name of <b>Bluestem Environmental Engineering, Inc.</b> by (signature) <i>Nick Holt</i>																																										
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: 785-298-3585. Send one to Water Well Owner and retain one for your records.																																										