

017245

mw-7

WATER WELL PLUGGING RECORD

Form WWC-5P

KSA 82a-1212

ID NO. \_\_\_\_\_

1	LOCATION OF WATER WELL: County: <u>Sedgwick</u>	Fraction <u>NE 1/4 SW 1/4 NE 1/4</u>	Section Number <u>32</u>	Township Number <u>26</u>	Range Number <u>2E</u>																								
Distance and direction from nearest town or city street address of well if located within city? <u>8905 E. 35th St N. Wichita KS</u>																													
2	WATER WELL OWNER: <u>The Boeing Co.</u> RR #, St. Address, Box #: <u>PO Box 7730</u> City, State, ZIP Code: <u>Wichita 67277</u> Board of Agriculture, Division of Water Resources Application Number: _____																												
3	MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX: <div style="display: flex; align-items: center; justify-content: center;"> <div style="text-align: center; margin-right: 10px;">N W E S</div> <table border="1" style="border-collapse: collapse; text-align: center;"> <tr><td></td><td></td><td></td></tr> <tr><td></td><td>X</td><td></td></tr> <tr><td></td><td></td><td></td></tr> </table> <div style="text-align: center; margin-left: 10px;">N E S E</div> </div>									X																			
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4	DEPTH OF WELL <u>24</u> ft WELL'S STATIC WATER LEVEL <u>0</u> ft. WELL WAS USED AS: <div style="display: flex; justify-content: space-between;"> <div>           1 Domestic 2 Irrigation 3 Feedlot 4 Industrial         </div> <div>           5 Public Water Supply 6 Oil Field Water Supply 7 Domestic (Lawn &amp; Garden) 8 Air Conditioning         </div> <div>           9 Dewatering 10 <u>Monitoring Well</u> 11 Injection Well 12 Other _____         </div> </div> Was a chemical / bacteriological sample submitted to Department? Yes _____ No <u>X</u> If yes, mo/day/yr sample was submitted _____ Water Well Disinfected: Yes _____ No <u>X</u>																												
5	TYPE OF BLANK CASING USED: <div style="display: flex; justify-content: space-between;"> <div>           1 Steel 2 <u>PVC</u> </div> <div>           3 RMP (SR) 4 ABS         </div> <div>           5 Wrought 6 Asbestos-Cement         </div> <div>           7 Fiberglass 8 Concrete Tile         </div> <div>           9 Other (Specify below) _____         </div> </div> Blank casing diameter <u>2</u> in. Was casing pulled? Yes <u>X</u> No _____ If yes, how much <u>24"</u> Casing height above or below land surface <u>0</u> in.																												
6	GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 <u>Bentonite</u> 4 Other _____ Grout Plug Intervals: From <u>0</u> ft. to <u>24</u> ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft. What is the nearest source of possible contamination: <div style="display: flex; justify-content: space-between;"> <div>           1 Septic tank 2 Sewer lines 3 Watertight sewer lines 4 Lateral lines 5 Cess Pool         </div> <div>           6 Seepage pit 7 Pit privy 8 Sewage lagoon 9 Feedyard 10 Livestock pens         </div> <div>           11 Fuel storage 12 Fertilizer storage 13 Insecticide storage 14 Abandoned water well 15 Oil well/Gas well         </div> <div>           16 Other (specify below) _____         </div> </div> 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:80%;">PLUGGING MATERIALS</th> </tr> </thead> <tbody> <tr> <td><u>0</u></td> <td><u>24</u></td> <td><u>Bentonite</u></td> </tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> </tbody> </table>						FROM	TO	PLUGGING MATERIALS	<u>0</u>	<u>24</u>	<u>Bentonite</u>																		
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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) <u>11-5-01</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>591</u> <u>11-9-01</u> under the business name of <u>geotechnical Services inc</u> by (signature) <u>Golden Schmat</u>																												
INSTRUCTIONS: Use typewriter or ball point 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, Topeka, Kansas 66620-0001. Telephone: 785/296-3565. Send one to Water Well Owner and retain one for your records.																													