WATER WELL PLUGGING RECORD Form WWC-5P

KSA 82a-1212

1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number	
County: SEALWICK	SW 1/4 SW 1/4 NE 1/4	a7	Tars	RIE	
Distance and direction from nearest town or city street address of well if located within city?					
SE corner of basement - 759 5. Green, Wichita					
2 WATER WELL OWNER: Many Marington 759 5 Green Bound of Appinulture Division of Vistor Bosources					
RR#, St. Address, Box #: City, State, ZIP Code : Wichita KS Board of Agriculture, Division of Water Resources Application Number: Michita					
3 MARK WELL'S LOCATION WITH 4 DEPTH OF WELL					
AN "X" IN SECTION BOX:					
	WELL WAS USED AS:				
	N W N E 1 Domestic 5 Public Water Supply 9 Dewatering				
	2 Irrigation <u>6 Oil Field Water Supply</u> 10 Monitoring Well 3 Feedlot <u>Lawn and Garden Only</u> 11 Injection Well				
w X	E 4 Industrial	8 Air Conditioning			
×					
S WS E Was a chemical/bacteriological sample submitted to Department? YesNo If yes, mo/day/yr sample was submitted					
Water Well Disinfected: Yes X No					
S					
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					
Casing height above or below land surface					
6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other					
Grout Plug Intervals: From. 2.1. ft. to Q 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 be(ow)					
2 Sewer lines 3 Watertight sewer lin	7 Pit privy nes 8 Sewage lagoon	12 Fertilizer stora 13 Insecticide stor	age termi		
4 Lateral lines 5 Cess Pool	9 Feedyard 10 Livestock pens	14 Abandoned water 15 Oil well/Gas wel	1 _	catment	
Direction from well? South How many feet?					
FROM TO PLUGGING MATERIALS					
71 0 (+ 1 1 1 - 1				
21 0 6.	mm T bleach	·			
	·····				
CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year)22					
Water Well Contractor's License No					
by (signature)					
INSTRUCTIONS: Use typewriter or ball point pen. <u>Please press firmly</u> and <u>print</u> 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.					