

1	LOCATION OF WATER WELL:	Fraction	Section	Number	Township	Number	Range	Number
	County: <u>SEDGWICK</u>	<u>SE 1/4 NE 1/4 NW 1/4</u>	<u>9</u>		<u>27</u>		<u>1E</u>	

Distance and direction from nearest town or city street address of well if located within city?

150' E AND 30' N OF CENTERLINE OF MASLEY AND 19<sup>TH</sup> STREETS, WICHITA, KS

2	WATER WELL OWNER: <u>SECURITY OIL</u>	RR #, St. Address, Box #: <u>P.O. BOX 48220</u>	Board of Agriculture, Division of Water Resources
	City, State, ZIP Code: <u>WICHITA, KANSAS 67201-8220</u>		Application Number:

3	MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4	DEPTH OF WELL <u>25</u> ft.												
			WELL'S STATIC WATER LEVEL <u>NA</u> ft.												
			WELL WAS USED AS:												
			<table border="0"> <tr> <td>1 Domestic</td> <td>5 Public Water Supply</td> <td>9 Dewatering</td> </tr> <tr> <td>2 Irrigation</td> <td>6 Oil Field Water Supply</td> <td>10 Monitoring Well</td> </tr> <tr> <td>3 Feedlot</td> <td>7 Domestic (Lawn &amp; Garden)</td> <td>11 Injection Well</td> </tr> <tr> <td>4 Industrial</td> <td>8 Air Conditioning</td> <td>12 Other <u>RECOVERY WELL</u></td> </tr> </table>	1 Domestic	5 Public Water Supply	9 Dewatering	2 Irrigation	6 Oil Field Water Supply	10 Monitoring Well	3 Feedlot	7 Domestic (Lawn & Garden)	11 Injection Well	4 Industrial	8 Air Conditioning	12 Other <u>RECOVERY WELL</u>
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			Was a chemical / bacteriological sample submitted to Department? Yes ..... No <input checked="" type="checkbox"/>												
			If yes, mo/day/yr sample was submitted .....												
			Water Well Disinfected: Yes ..... No <input checked="" type="checkbox"/>												

5	TYPE OF BLANK CASING USED:										
	<table border="0"> <tr> <td>① Steel</td> <td>3 RMP (SR)</td> <td>5 Wrought</td> <td>7 Fiberglass</td> <td>9 Other (Specify below)</td> </tr> <tr> <td>2 PVC</td> <td>4 ABS</td> <td>6 Asbestos-Cement</td> <td>8 Concrete Tile</td> <td></td> </tr> </table>	① Steel	3 RMP (SR)	5 Wrought	7 Fiberglass	9 Other (Specify below)	2 PVC	4 ABS	6 Asbestos-Cement	8 Concrete Tile	
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2 PVC	4 ABS	6 Asbestos-Cement	8 Concrete Tile								
	Blank casing diameter <u>10</u> in. Was casing pulled? Yes ..... No <input checked="" type="checkbox"/> If yes, how much .....										
	Casing height above or below land surface ..... in.										

6	GROUT PLUG MATERIAL:	1 Neat cement	2 Cement grout	③ Bentonite	④ Other <u>NATIVE SOIL</u>														
	Grout Plug Intervals: From <u>5</u> ft. to <u>25</u> ft., From <u>0</u> ft. to <u>5</u> ft., From ..... to ..... ft.																		
	What is the nearest source of possible contamination:																		
	<table border="0"> <tr> <td>1 Septic tank</td> <td>6 Seepage pit</td> <td>11 Fuel storage</td> </tr> <tr> <td>2 Sewer lines</td> <td>7 Pit privy</td> <td>12 Fertilizer storage</td> </tr> <tr> <td>3 Watertight sewer lines</td> <td>8 Sewage lagoon</td> <td>13 Insecticide storage</td> </tr> <tr> <td>4 Lateral lines</td> <td>9 Feedyard</td> <td>14 Abandoned water well</td> </tr> <tr> <td>5 Cess Pool</td> <td>10 Livestock pens</td> <td>15 Oil well/Gas well</td> </tr> </table>	1 Septic tank	6 Seepage pit	11 Fuel storage	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			⑥ Other (specify below) <u>UNKNOWN</u>
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	Direction from well? <u>NA</u> How many feet? <u>NA</u>																		

FROM	TO	PLUGGING MATERIALS
0'	5'	NATIVE SOIL
5'	25'	BENTONITE

RW1

7	CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) <u>5/2/03</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>527</u> This Water Well Record was completed on (mo/day/year) <u>5/30/03</u> under the business name of <u>GEEDORE INC.</u> by (signature) <u>Dale RBB</u>
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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.