

LOST WELL

WATER WELL PLUGGING RECORD

Form WWC-5P

KSA 82a-1212

ID NO.

MW-21

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|---------|-------------------------|-----------------------------|----------------|-----------------|--------------|
| 1 | LOCATION OF WATER WELL: | Fraction | Section Number | Township Number | Range Number |
| County: | <u>Sedgwick</u> | <u>NE 1/4 NE 1/4 NE 1/4</u> | <u>29</u> | <u>27S</u> | <u>1E</u> |

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

603 S. Broadway, Wichita, KS

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|---------------------------|---|---|
| 2 | WATER WELL OWNER: <u>BP Amoco #5092</u> | Board of Agriculture, Division of Water Resources |
| RR #, St. Address, Box #: | <u>603 Broadway</u> | Application Number: |
| City, State, ZIP Code : | <u>Wichita, KS</u> | |

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| 3 | MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX: | 4 | DEPTH OF WELL <u>22.6</u> ft |
| | | WELL'S STATIC WATER LEVEL <u>14</u> 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 Domestic (Lawn & Garden) 11 Injection Well 4 Industrial 8 Air Conditioning 12 Other 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> | |

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| 5 | TYPE OF BLANK CASING USED: |
| 1 Steel 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (Specify below) | |
| <u>2</u> PVC 4 ABS 6 Asbestos-Cement 8 Concrete Tile | |
| Blank casing diameter <u>2</u> in. | Was casing pulled? Yes No <u>X</u> well was destroyed |
| Casing height above or below land surface | If yes, how much |

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| 6 | GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other Grout Plug Intervals: From <u>0</u> ft. to <u>4</u> ft., From <u>4</u> ft. to <u>10</u> ft., From 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? <u>N</u> How many feet? <u>~150-200</u> |
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| FROM | TO | PLUGGING MATERIALS |
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KDHE requested BE&K/Terranest complete this form as the well has not been located for several years.

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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) and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>9/18/05</u> under the business name of <u>BE&K/Terranest</u> This Water Well Record was completed on (mo/day/year) by (signature) <u>Kara M. Pyle</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.