

WATER WELL PLUGGING RECORD

Form WWC-5P

KSA 82a-1212

ID No. _____

1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: Sedgwick	NE 1/4 SE 1/4 NW 1/4	29	27	01 E

Distance and direction from nearest town or city street address of well if located within city?
820 S. Osage, Wichita

2 WATER WELL OWNER:	USD 259	Board of Agriculture, Division of Water Resources
RR#, St. Address, Box #	3850 N. Hydraulic	Application Number:
City, State, ZIP Code :	Wichita, KS 67219	

3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:

4 DEPTH OF WELL **20** ft.

WELL'S STATIC WATER LEVEL **13.3** ft.

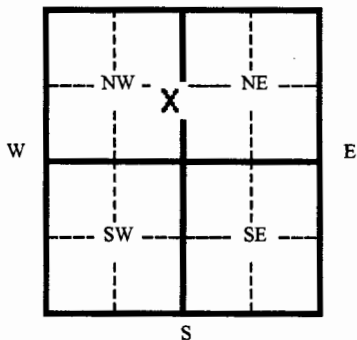
WELL WAS USED AS:

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

Was a chemical/bacteriological sample submitted to Department? Yes No **X**

If yes, mo/day/yr sample was submitted

Water Well Disinfected: Yes No **X**



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 **2** in. Was casing pulled? Yes No **X** If yes, how much

Casing height above or below land surface **0** in. **Overdrilled to 20 feet below ground surface**

6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout **3 Bentonite** 4 Other

Grout Plug Intervals From **2** ft. to **20** 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?

FROM	TO	CODE	PLUGGING MATERIALS
0	2		Soil and rock
2	10		Bentonite
10	20		Well collapsed - native sand

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/yr) **3-10-05** and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **531** This Water Well Record was completed on (mo/day/yr) **3-18-05** under the business name of **Geotechnical Services, Inc.** by (signature) *William W. Smith*

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: 785-296-3565. Send one to Water Well Owner and retain one for your records.