

<b>1</b>	<b>LOCATION OF WATER WELL:</b> County: Sedgwick	Fraction SW NE SW SE SW 1/4 NE 1/4 SW 1/4	Section Number 17	Township Number 27	Range Number 1E EW																											
Distance and direction from nearest town or city street address of well if located within city? 707 N Waco St.																																
<b>2</b>	<b>WATER WELL OWNER:</b> Kum & Go RR #, St. Address, Box #: 707 N Waco St. City, State, ZIP Code : Wichita, KS																															
Board of Agriculture, Division of Water Resources Application Number:																																
<b>3</b>	<b>MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:</b> <div style="display: flex; align-items: center; justify-content: center;"> <div style="text-align: center; margin-right: 10px;">N</div> <table border="1" style="border-collapse: collapse; text-align: center;"> <tr><td></td><td></td><td></td><td></td></tr> <tr><td>NW</td><td></td><td></td><td>NE</td></tr> <tr><td></td><td></td><td></td><td></td></tr> <tr><td>SW</td><td></td><td>X</td><td>SE</td></tr> <tr><td></td><td></td><td></td><td></td></tr> </table> <div style="text-align: center; margin-left: 10px;">S</div> </div> <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <span>W</span> <span>E</span> </div>									NW			NE					SW		X	SE											
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SW		X	SE																													
<b>4</b>	DEPTH OF WELL ..... 19.00 ..... ft. WELL'S STATIC WATER LEVEL ..... 12.26 ..... ft. WELL WAS USED AS: <div style="display: flex; flex-wrap: wrap;"> <div style="width: 33%;">           1 Domestic            2 Irrigation            3 Feedlot            4 Industrial         </div> <div style="width: 33%;">           5 Public Water Supply            6 Oil Field Water Supply            7 Domestic (Lawn &amp; Garden)            8 Air Conditioning         </div> <div style="width: 33%;">           9 Dewatering  <input checked="" type="radio"/> 10 Monitoring Well            11 Injection Well            12 Other .....         </div> </div> 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"/> .....																															
<b>5</b>	<b>TYPE OF BLANK CASING USED:</b> <div style="display: flex; flex-wrap: wrap;"> <div style="width: 25%;">1 Steel</div> <div style="width: 25%;">3 RMP (SR)</div> <div style="width: 25%;">5 Wrought</div> <div style="width: 25%;">7 Fiberglass</div> <div style="width: 25%;">9 Other (Specify below)</div> <div style="width: 25%;"><input checked="" type="radio"/> PVC</div> <div style="width: 25%;">4 ABS</div> <div style="width: 25%;">6 Asbestos-Cement</div> <div style="width: 25%;">8 Concrete Tile</div> </div> Blank casing diameter ..... 2 ..... in.      Was casing pulled?      Yes <input checked="" type="checkbox"/> ..... No .....      If yes, how much ..... 3 ft ..... Casing height above or below land surface ..... 3 ft ..... below ..... in.																															
<b>6</b>	<b>GROUT PLUG MATERIAL:</b> 1 Neat cement      2 Cement grout <input checked="" type="radio"/> Bentonite      4 Other ..... Grout Plug Intervals:      From ..... 19.00 ..... ft.      to ..... 2 ..... ft.,      From ..... ft.      to ..... ft.,      From ..... to ..... ft. What is the nearest source of possible contamination: <div style="display: flex; flex-wrap: wrap;"> <div style="width: 33%;">           1 Septic tank            2 Sewer lines            3 Watertight sewer lines            4 Lateral lines            5 Cess pool         </div> <div style="width: 33%;">           6 Seepage pit            7 Pit privy            8 Sewage lagoon            9 Feedyard            10 Livestock pens         </div> <div style="width: 33%;"> <input checked="" type="radio"/> 11 Fuel storage            12 Fertilizer storage            13 Insecticide storage            14 Abandoned water well            15 Oil well/Gas well         </div> <div style="width: 33%;">           16 Other (specify below) .....         </div> </div> Direction from well? ..... North .....      How many feet? ..... 150 .....																															
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:15%;">FROM</th> <th style="width:10%;">TO</th> <th style="width:75%;">PLUGGING MATERIALS</th> </tr> </thead> <tbody> <tr> <td>19.00</td> <td>2</td> <td>Bentonite</td> </tr> <tr> <td>2</td> <td>1</td> <td>Native Soil</td> </tr> <tr> <td>1</td> <td>0</td> <td>Concrete</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	19.00	2	Bentonite	2	1	Native Soil	1	0	Concrete															
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<b>7</b>	<b>CONTRACTOR'S OF LANDOWNER'S CERTIFICATION:</b> 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. .... This Water Well Record was completed on (mo/day/year) ..... by (signature) ..... under the business name of GeoStat Environmental, LLC ..... KS P.G. # 022																															
<b>INSTRUCTIONS:</b> 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, Geology Section, 1000 SW Jackson St., Ste. 420, Topeka, Kansas 66612-1367. Telephone: 785/296-5522. Send one to Water Well Owner and retain one for your records.																																