W	ATER WELL PLUGGING R	ECORD Form WWC	-5P KSA 82a-1212 ID NO.		
1	LOCATION OF WATER WELL: County: Sedgwick Distance and direction from nearest t	Fraction SW 1/4 SE SW SE 1	Section Number Township Number Range Number 7 27 2 EAST E/N		
	Distance and direction from nearest t	own or city street address of w	vell if located within city?	-	
	1800 Mckee, wichil	M Located	in basement w/ concrete floor,		
2	WATER WELL OWNER:		Global Positioning Systems (decimal degrees, min. of 4 digits	 3	
	RR#, St. Address, Box #: 1900	Ames Mckee	Latitude:		
		nita KS 67203	Elevation:		
	City, State ZIP Code:	61203	Datum:		
3	MARK WELL'S LOCATION	4 DEPTH OF WELL_	26 ft.		
	WITH AN "X" IN SECTION BOX:	WELL'S STATIC WA	TER LEVELft		
	N				
İ		WELL WAS USED A	S:		
	NW NE	1 Domestic	5 Public Water Supply 9 Dewatering		
v	/	②Irrigation 3 Feedlot	6 Oil Field Water Supply 10 Monitoring 7 Domestic (Lawn & Garden) 11 Injection Well		
	SW SE	4 Industrial	8 Air Conditioning 12 Other	_	
		Was a chemical/hacter	ological sample submitted to Department? Yes No 🗶		
	S	was a chemical bacter	otogical sample submitted to Department. Tes11021		
5 TYPE OF BLANK CASING USED:					
	OSteel 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (Specify below) 2 PVC 4 ABS 6 Asbestos-Cement 8 Concrete Tile				
Blank casing diameter in. Was casing pulled? Yes NoX 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  Grout Plug Intervals: From ft. to ft., From ft. to ft., From 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					
	2 Sewer lines 7 Pit privy 12 Fertilizer storage				
	4 Lateral lines 9 Feedyard 14 Abandoned water well Direction from well? N				
	5 Cess pool 10 Livestock pens 15 Oil well/Gas well How many feet?				
	FROM TO PLUGO	GING MATERIALS	FROM TO PLUGGING MATERIALS		
				+	
				1	
				-	
				_	
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 This Water Well Record was completed on (mo/day/year) under the business name of Ames by (signature)					
INSTRUCTIONS: Use typewriter or ballpoint 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. Visit us at http://www.kdheks.gov/geo/waterwells.					