						Controled		
v	VATER WEL	L PLUGO	SING RECORD For			ID No.	IAS-5	
LOCATI	ON OF WATE	R WELL:	Fraction		Section Number	Township Number	Range Number	
ounty:	Sedgv	vick	SW 1/4 NW	1/4 SW 1/4	33	27S	1E	
istance a	and direction	from nea	rest town or city street add 2160 South Broadw					
			unt Cigarettes					
itv. State	ddress, Box	• Wichita	, Kansas			of Agriculture, Division ation Number:	n of yvater Resource	
MARK V	VELL'S LOCA	TON WITH	AN 4 DEPTH OF WELL	28.97	ħ.			
Κ	N		WELL'S STATIC W		18.11 t .			
	NW	NE	WELL WAS USED	AS:				
		i	1 Domestic	5 Publi	c Water Supply	9 Dewateri		
×		1		8 Oli F			-	
			3 Feedlot		and Garden (domesti			
X	ew	i en	4 Industrial	8 AF C	onditioning	12 Other		
	sw	SE				? Yes :	No	
			lf yes, mo/day/yr sample Water Well Disinfected:	was submitted Yes	No			
TYPE O	F BLANK CAL	SING USE	 D:					
1 Stee		3 RMP (SI				pecify below)		
2PVC		4 ABC	5 Asbestos-Cement in. Was casing pulled?	t 8 Concrete T	ie	5°°±	****************	
					If yes, how m	uch <u>st</u> t	*-****	
Casing h	eight above o	r below lan	id surface - 3.6	_ in .				
-			Neat cement 2 Cement gi	<u> </u>				
Grout P	Nuo intervals	From	0 Ato 28,97 A.	From	ft. to	ft. From	ft.to ft.	
	-		saible contamination:					
1 Ser	ptic tank		6 Seepage pit	5 Seepage pit (11)Fuel storage			15 Other (specify below)	
-	war linas		7 Ptt privy		ter storage	••••		
3 Watertight sewer lines			8 Sewage legoon 13 insecticide storage			***************		
4 Lateral lines			9 Feedyard 14 Abandoned water well					
5 Ce	as Pool		10 Livestock pans	15 Oil we	l/ Gas well			
hection fr	om well?			How many f	bot?			
FROM TO CODE			the same second the second	PLUGGING MATERIALS Bentonite				
0	28.97		Ве	nionite			ECEIVED	
	<u> </u>							
							N 0 8 2009	
<u> </u>				· · · · · · · · · · · · · · · · · · ·		BURE	AU OF WATER	
		····		·				
			OWNER'S CERTIFICATION		· • •		•	
on (i	mo/day/yr)		4/30/07	and this (ecord is true to the	best of my knowledge	and belief. Kansas	
Wat	er Well Cont	ractor's U	cense No.	554	This Water Well	Record was complete	d on (mo/day/yr)	
	5/10	0/07	under the business r	name of A	. Worden bill V	Voofter Pump and Well		
by	(signature)		under the business r	yoy	·		The	
INST	RUCTIONS	: Please i	fill in blanks and circle the	e correct answe	rs. Send three con	vies to Kansas Depart	ment of Health and	
Envir	onment, Bu	reau of W	ater, 1000 S W Jackson	St., Ste. 420, T				
Send	one to Wat	er Well O	wner and retain one for y	our records.		· ···		