

WATER WELL PLUGGING RECORD Form WWC-5P

KSA 82a-1212

ID NO.

MW-142S

1 LOCATION OF WATER WELL: County: Sedgwick Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here ☒ 2nd & St. Francis, Wichita, KS	Fraction NW 1/4 SE 1/4 NW 1/4 1/4	Section Number 21	Township Number T 27 S	Range Number 1 ☒ E ☐ W
---	--------------------------------------	-----------------------------	----------------------------------	---

Global Positioning Systems (GPS) information:
 Latitude: _____ (in decimal degrees)
 Longitude: _____ (in decimal degrees)
 Elevation: _____
 Datum: ☐ WGS84, ☐ NAD83, ☐ NAD27
 Collection Method: _____
☐ GPS unit (Make/Model: _____)
☐ Digital Map/Photo, ☐ Topographic Map, ☐ Land Survey
 Est. Accuracy: ☐ < 3 m, ☐ 3-5 m, ☐ 5-15 m, ☐ > 15 m

2 WATER WELL OWNER: Sedgwick County RR#, St. Address, Box #: 525 N Main, Suite 823 City, State ZIP Code: Wichita, KS 67203	3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX: N <table border="1" style="margin: auto; border-collapse: collapse;"> <tr> <td style="padding: 5px;">NW</td> <td style="padding: 5px;">NE</td> </tr> <tr> <td style="padding: 5px;">SW</td> <td style="padding: 5px;">SE</td> </tr> </table> S W E	NW	NE	SW	SE
NW	NE				
SW	SE				

4 DEPTH OF WELL 20 ft.
 WELL'S STATIC WATER LEVEL 13 ft.
 WELL WAS USED AS:

☐ Domestic	☐ Public Water Supply	☐ Dewatering
☐ Irrigation	☐ Oil Field Water Supply	☒ Monitoring
☐ Feedlot	☐ Domestic (Lawn & Garden)	☐ Injection Well
☐ Industrial	☐ Air Conditioning	☐ Other _____

 Was a chemical/bacteriological sample submitted to Department? Yes ☐ No ☒

5 TYPE OF BLANK CASING USED:

☒ Steel	☐ RMP (SR)	☐ Wrought	☐ Fiberglass	☐ Other (Specify below) _____
☒ PVC	☐ ABS	☐ Asbestos-Cement	☐ Concrete Tile	

 Blank casing diameter 2" in. Was casing pulled? Yes ☒ No ☐ If yes, how much 3'
 Casing height above or below land surface 36 in.

6 GROUT PLUG MATERIAL: ☐ Neat cement ☐ Cement grout ☒ Bentonite ☐ Other _____
 Grout Plug Intervals: From 3 ft. to 20 ft., From _____ ft. to _____ ft., From _____ to _____ ft.
 What is the nearest source of possible contamination:

☐ Septic tank	☐ Seepage pit	☐ Fuel Storage	☐ Other (specify below) _____
☐ Sewer lines	☐ Pit privy	☐ Fertilizer storage	
☐ Watertight sewer lines	☐ Sewage lagoon	☐ Insecticide storage	
☐ Lateral lines	☐ Feedyard	☒ Abandoned water well	Direction from well? <u>east</u>
☐ Cess pool	☐ Livestock pens	☐ Oil well/Gas well	How many feet? <u>25'</u>

FROM	TO	PLUGGING MATERIALS	FROM	TO	PLUGGING MATERIALS
20	3	Bentonite Chips			
3	0	Top Soil			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 1/17/11 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 238. This Water Well Record was completed on (mo/day/year) 1/24/11 under the business name of Premier Pump and Well Service, Inc by (signature) [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: 785/296-5524. Send one to Water Well Owner and retain one for your records. Visit us at <http://www.kdheks.gov/waterwell/index.html>.

Check one: ☒ White Copy ☐ Blue Copy ☐ Pink Copy