

## WATER WELL PLUGGING RECORD

Form WWC-5P

KSA 82a-1212

ID No.

MW-37

<b>1 LOCATION OF WATER WELL:</b>	<b>Fraction</b>	<b>Section Number</b>	<b>Township Number</b>	<b>Range Number</b>																																				
County: <u>Sedgwick</u>	<u>SW 1/4 NW 1/4 SW 1/4</u>	<u>33</u>	<u>27</u>	<u>1E</u>																																				
Distance and direction from nearest town or city street address of well if located within city? <u>2160 S Broadway, Wichita, KS</u>																																								
<b>2 WATER WELL OWNER:</b> <u>Discount Cigarettes</u>																																								
RR#, St. Address, Box # <u>2160 S Broadway</u>																																								
City, State, ZIP Code <u>Wichita, KS</u>																																								
Board of Agriculture, Division of Water Resources Application Number: _____																																								
<b>3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:</b>		<b>4 DEPTH OF WELL</b> <u>26</u> ft.																																						
		<b>WELL'S STATIC WATER LEVEL</b> <u>19</u> ft.																																						
		<b>WELL WAS USED AS:</b>																																						
		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 ____ If yes, mo/day/yr sample was submitted _____ Water Well Disinfected: Yes ____ No ____																																						
<b>5 TYPE OF BLANK CASING USED:</b>																																								
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 <u>1</u> in. Was casing pulled? Yes <u>x</u> No ____ If yes, how much <u>3</u> feet																																								
Casing height above or below land surface _____ in.																																								
<b>6 GROUT PLUG MATERIAL:</b> 1 Neat cement    2 Cement grout    ③ Bentonite    4 Other _____																																								
Grout Plug Intervals From _____ ft. to _____ 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? _____																																								
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>FROM</th> <th>TO</th> <th>CODE</th> <th>PLUGGING MATERIALS</th> </tr> </thead> <tbody> <tr> <td>3</td> <td>26</td> <td></td> <td>Bentonite grout-30% solids</td> </tr> <tr> <td>0</td> <td>3</td> <td></td> <td>Native materials</td> </tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> </tbody> </table>					FROM	TO	CODE	PLUGGING MATERIALS	3	26		Bentonite grout-30% solids	0	3		Native materials																								
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<b>7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:</b> This water well was plugged under my jurisdiction and was completed on (mo/day/yr) <u>8/30/11</u> 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/yr) <u>9/8/11</u> under the business name of <u>Bluestem Environmental Engineering, Inc.</u> by (signature) <u>Nick Holt</u>																																								
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.																																								