\mathbf{W}_{A}	ATER WELL PLUGGING RE		C-5P KSA	82a-1212 ID NO.		
1	LOCATION OF WATER WELL: County:	Fraction St.	½ (<i>D</i>	273	Range Number EW	
	Distance and direction from nearest town or city street address of well if located within city?					
2427 N Riverlaun DR, Wichita, KS						
2	WATER WELL OWNER:		Global Positioning Systems (decimal degrees, min. of 4 digits Latitude:			
	RR#, St. Address, Box #: 2427 N Riverlaum		Longitude: Elevation:			
	City, State ZIP Code: Wich ta,	Data Collection Method:				
3	MARK WELL'S LOCATION	4 DEPTH OF WELL	18	ft.		
	WITH AN "X" IN SECTION BOX:	WELL'S STATIC W	STATIC WATER LEVEL 12 ft			
WELL WAS USED AS:						
	NW NE -	1 Domestic	5 Public Water	Supply 9 Dewa	atering	
W	E		6 Oil Field Wa			
**	SW SE	3 Feedlot4 Industrial	Omestic (La 8 Air Condition		etion Well er	
		Was a chemical/bacteriological sample submitted to Department? Yes No X				
5 TYPE OF BLANK CASING USED:						
	Steel 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (Specify below) 2 PVC 4 ABS 6 Asbestos-Cement 8 Concrete Tile					
	$\mathcal{Z}_{\mathcal{L}}$					
Blank casing diameter 2 in. Was casing pulled? Yes No If yes, how much 3ft Casing height above or below land surface in.						
6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout ft. to 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 Direction from well? 5 Cess pool 10 Livestock pens 15 Oil well/Gas well How many feet?					
	FROM TO PLUGGI	NG MATERIALS	FROM TO	PLUGGING MA	ATERIALS	
	26 D rea		TROM TO	T EGGGING WII	TERMES	
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						
	Il Contractor's License No. 740 iness name of Wennaer		by (signature)	aron (mo/day/year)	under the	
INS	STRUCTIONS: Use typewriter or ball	point pen. Please tyess firm	nly and print clearly	700000	X	
con	rect answers. Send top three copies to k	Kansas Department of Healt	h and Environment	t, 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.					