

WATER WELL PLUGGING RECORD Form WWC-5P KSA 82a-1212 ID NO. 123456789

1 LOCATION OF WATER WELL: County: <u>Sedgwick</u>	Fraction <u>NE 1/4 NW 1/4 NE 1/4 NE 1/4</u>	Section Number <u>28 34</u>	Township Number <u>T 27 S</u>	Range Number <u>1</u> <input checked="" type="checkbox"/> E <input type="checkbox"/> W
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Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here <input type="checkbox"/> Former Total #1855 <u>3128 East Harry, Wichita, KS 67211</u>	Global Positioning Systems (GPS) information: Latitude: <u>37.66429</u> (in decimal degrees) Longitude: <u>97.30116</u> (in decimal degrees) Elevation: <u>1305.13</u> Datum: <input type="checkbox"/> WGS84, <input checked="" type="checkbox"/> NAD83, <input type="checkbox"/> NAD27 Collection Method: <input type="checkbox"/> GPS unit (Make/Model: _____) <input type="checkbox"/> Digital Map/Photo, <input type="checkbox"/> Topographic Map, <input checked="" type="checkbox"/> Land Survey Est. Accuracy: <input checked="" type="checkbox"/> < 3 m, <input type="checkbox"/> 3-5 m, <input type="checkbox"/> 5-15 m, <input type="checkbox"/> > 15 m
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2 WATER WELL OWNER: <u>KDHE-BER</u> RR#, St. Address, Box #: <u>1000 SW Jackson, Ste 410</u> City, State ZIP Code: <u>Topeka, KS 66612</u>	3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX: <div style="text-align: center;"> <table border="1" style="margin: auto;"> <tr><td colspan="3" style="text-align: center;">N</td></tr> <tr><td style="text-align: center;">NW</td><td style="text-align: center;"> </td><td style="text-align: center;">NE</td></tr> <tr><td style="text-align: center;">W</td><td style="text-align: center;"> </td><td style="text-align: center;">E</td></tr> <tr><td style="text-align: center;">SW</td><td style="text-align: center;"> </td><td style="text-align: center;">SE</td></tr> <tr><td colspan="3" style="text-align: center;">S</td></tr> </table> </div>	N			NW		NE	W		E	SW		SE	S			4 DEPTH OF WELL <u>30</u> ft. WELL'S STATIC WATER LEVEL <u>Dry</u> ft WELL WAS USED AS: <input type="checkbox"/> Domestic <input type="checkbox"/> Public Water Supply <input type="checkbox"/> Dewatering <input type="checkbox"/> Irrigation <input type="checkbox"/> Oil Field Water Supply <input checked="" type="checkbox"/> Monitoring <input type="checkbox"/> Feedlot <input type="checkbox"/> Domestic (Lawn & Garden) <input type="checkbox"/> Injection Well <input type="checkbox"/> Industrial <input type="checkbox"/> Air Conditioning <input type="checkbox"/> Other <u>MW-25</u> Was a chemical/bacteriological sample submitted to Department? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
N																	
NW		NE															
W		E															
SW		SE															
S																	

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 Entire well removed
 Casing height above or below land surface 0 in.

6 GROUT PLUG MATERIAL: Neat cement Cement grout Bentonite Other New well installed

Grout Plug Intervals: From N/A ft. to N/A ft., From N/A ft. to N/A ft., From N/A to N/A ft.

What is the nearest source of possible contamination:

<input type="checkbox"/> Septic tank	<input type="checkbox"/> Seepage pit	<input checked="" type="checkbox"/> Fuel Storage	<input type="checkbox"/> Other (specify below) _____
<input type="checkbox"/> Sewer lines	<input type="checkbox"/> Pit privy	<input type="checkbox"/> Fertilizer storage	
<input type="checkbox"/> Watertight sewer lines	<input type="checkbox"/> Sewage lagoon	<input type="checkbox"/> Insecticide storage	
<input type="checkbox"/> Lateral lines	<input type="checkbox"/> Feedyard	<input type="checkbox"/> Abandoned water well	Direction from well? <u>North</u>
<input type="checkbox"/> Cess pool	<input type="checkbox"/> Livestock pens	<input type="checkbox"/> Oil well/Gas well	How many feet? <u>~75-feet</u>

FROM	TO	PLUGGING MATERIALS	FROM	TO	PLUGGING MATERIALS
0	30	Well pad and entire well removed			
		Replacement well drilled in same			
		boring deeper (MW-25R).			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 9-3-2014 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 759. This Water Well Record was completed on (mo/day/year) 9-26-2014 under the business name of RAZEK Environmental, LLC 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 one copy 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>.