

WATER WELL PLUGGING RECORD Form WWC-5P

KSA 82a-1212

ID NO.

0043970

1 LOCATION OF WATER WELL: County: Sedgwick	Fraction NE ¼ NE ¼ NE ¼ ¼	Section Number 33	Township Number T 27 S	Range Number 1 ☒ E ☐ 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 ☐ 1601 S. Hydraulic, Wichita, Kansas

Global Positioning Systems (GPS) information:
 Latitude: _____ (in decimal degrees)
 Longitude: _____ (in decimal degrees)
 Elevation: _____
 Horizontal 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: c/o ANTEA USA, Inc. RR#, St. Address, Box #: 150 St. Peters Centre Blvd, Ste C City, State ZIP Code: St. Peters, MO 63376	
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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	4 DEPTH OF WELL 17 ft. WELL'S STATIC WATER LEVEL _____ ft. WELL WAS USED AS: ☐ Domestic ☐ Irrigation ☐ Feedlot ☐ Industrial ☐ Public Water Supply ☐ Oil Field Water Supply ☐ Domestic (Lawn & Garden) ☐ Air Conditioning ☐ Dewatering ☐ Monitoring ☐ Injection Well ☒ Other SVE Was a chemical/bacteriological sample submitted to Department? Yes ☐ No ☐
NW	NE				
SW	SE				

5 TYPE OF BLANK CASING USED:
☐ Steel ☐ RMP (SR) ☐ Wrought ☐ Fiberglass ☐ Other (Specify below)
☒ PVC ☐ ABS ☐ Asbestos-Cement ☐ Concrete Tile
 Blank casing diameter 4 in. Was casing pulled? Yes ☒ No ☐ If yes, how much ~3ft below ground surface
 Casing height above or below land surface _____ in.

6 GROUT PLUG MATERIAL: ☐ Neat cement ☐ Cement grout ☒ Bentonite ☐ Other _____
 Grout Plug Intervals: From 3 ft. to 17 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 What is the nearest source of possible contamination:

☐ Septic tank
☐ Sewer lines
☐ Watertight sewer lines
☐ Lateral lines
☐ Cess pool

☐ Seepage pit
☐ Pit privy
☐ Sewage lagoon
☐ Feedyard
☐ Livestock pens

☐ Fuel storage
☐ Fertilizer storage
☐ Insecticide storage
☐ Abandoned water well
☐ Oil well/Gas well

☐ Other (specify below) _____
 Direction from well? _____
 How many feet? _____

FROM	TO	PLUGGING MATERIALS	FROM	TO	PLUGGING MATERIALS
3	17	Bentonite			
					SVE-2

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 5/4/2015 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) 5/11/2015 under the business name of GreenField Contractors, Inc. by (signature) *Melissa D. Melhus*

Send one white copy to Kansas Department of Health & Environment, Geology Section, 1000 SW Jackson Street, Ste. 420, Topeka, KS 66612-1367. Send one copy to WATER WELL OWNER and retain one for your records.

Visit us at <http://www.kdheks.gov/waterwell/index.html> Telephone 785-296-5524.

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Revised 1/20/2015