WATER WELL PLUGGING RECORD Form WWC-5P KSA 82a-1212 ID NO. 1 LOCATION OF WATER WELL: Fraction Section Number Township Number Range Number		
County: Sedgwick SE 1/4 NW/4 DE 1/4 SW 1/4 T 27 S / FE	r W	
Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here 1918 N. Sankafe Back site of Elevation: Datum: W WGS84, NAD83, NAD87	grees) grees)	
2 WATER WELL OWNER: City of Wichita/Env. Hlth RR#, St. Address, Box #: City, State ZIP Code: Wichita, KS 67202 Collection Method: GPS unit (Make/Model: Garmin 60C Topographic Map, □ Land Sur Est. Accuracy: ✓ < 3 m, □ 3-5 m, □ 5-15 m, □ > 15		
3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX: N	_	
5 TYPE OF BLANK CASING USED:		
Steel RMP (SR) Asbestos-Cement Fiberglass Other (Specify below)		
FROM TO PLUGGING MATERIALS FROM TO PLUGGING MATERIALS		
0 2 Topsoil 2 40 Bentonite		
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 3/5/2020 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 710 . This Water Well Record was completed on (mo/day/year) 7/10/2020 under the business name of Below Ground Surface, Inc. by (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		