

**Form WWC-5P**

**KSA 82a-1212**

ID NO.

MW-6

| <b>1 LOCATION OF WATER WELL:</b><br>County: <b>Sedgwick</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |    | Fraction <b>¼ NW ¼ NW ¼ SW ¼</b> |      | Section Number <b>20</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                    | Township Number <b>T 27 S</b> |  | Range Number <b>1</b> <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"/> <b>206 N. Seneca</b><br><b>Wichita, KS</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |    |                                  |      | <b>Global Positioning Systems (GPS) information:</b><br>Latitude: _____ (in decimal degrees)<br>Longitude: _____ (in decimal degrees)<br>Elevation: _____<br>Horizontal Datum: <input type="checkbox"/> WGS84, <input type="checkbox"/> NAD83, <input type="checkbox"/> NAD27<br>Collection Method: _____<br><input type="checkbox"/> GPS unit (Make/Model: _____)<br><input type="checkbox"/> Digital Map/Photo, <input type="checkbox"/> Topographic Map, <input type="checkbox"/> Land Survey<br>Est. Accuracy: <input type="checkbox"/> < 3 m, <input type="checkbox"/> 3-5 m, <input type="checkbox"/> 5-15 m, <input type="checkbox"/> > 15 m                                                                                                                                                                                                                                      |                    |                               |  |                                                                                        |  |      |    |                    |      |    |                    |   |    |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| <b>2 WATER WELL OWNER:</b> <b>Estfan, LLC</b><br>RR#, St. Address, Box #: <b>206 N. Seneca</b><br>City, State ZIP Code: <b>Wichita, KS 67203</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |    |                                  |      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                    |                               |  |                                                                                        |  |      |    |                    |      |    |                    |   |    |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| <b>3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:</b><br><div style="text-align: center;">N<br/>NW NE<br/>SW SE<br/>S</div> <div style="display: flex; justify-content: space-between; width: 100%;">W<span style="margin-left: 150px;">E</span></div>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |    |                                  |      | <b>4 DEPTH OF WELL</b> <u>23</u> <b>ft.</b><br>WELL'S STATIC WATER LEVEL _____ <b>ft</b><br>WELL WAS USED AS:<br><div style="display: flex; justify-content: space-between;"><div><input type="checkbox"/> Domestic<br/><input type="checkbox"/> Irrigation<br/><input type="checkbox"/> Feedlot<br/><input type="checkbox"/> Industrial</div><div><input type="checkbox"/> Public Water Supply<br/><input type="checkbox"/> Oil Field Water Supply<br/><input type="checkbox"/> Domestic (Lawn &amp; Garden)<br/><input type="checkbox"/> Air Conditioning</div><div><input type="checkbox"/> Dewatering<br/><input checked="" type="checkbox"/> Monitoring<br/><input type="checkbox"/> Injection Well<br/><input type="checkbox"/> Other _____</div></div><br>Was a chemical/bacteriological sample submitted to Department? Yes <input type="checkbox"/> No <input type="checkbox"/> |                    |                               |  |                                                                                        |  |      |    |                    |      |    |                    |   |    |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| <b>5 TYPE OF BLANK CASING USED:</b><br><div style="display: flex; justify-content: space-between;"><div><input type="checkbox"/> Steel<br/><input checked="" type="checkbox"/> PVC</div><div><input type="checkbox"/> RMP (SR)<br/><input type="checkbox"/> ABS</div><div><input type="checkbox"/> Wrought<br/><input type="checkbox"/> Asbestos-Cement</div><div><input type="checkbox"/> Fiberglass<br/><input type="checkbox"/> Concrete Tile</div><div><input type="checkbox"/> Other (Specify below) _____</div></div><br>Blank casing diameter <u>2</u> in. Was casing pulled? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> If yes, how much <u>~3ft.</u> below ground surface<br>Casing height above or below land surface _____ in.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |    |                                  |      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                    |                               |  |                                                                                        |  |      |    |                    |      |    |                    |   |    |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| <b>6 GROUT PLUG MATERIAL:</b> <input type="checkbox"/> Neat cement <input type="checkbox"/> Cement grout <input checked="" type="checkbox"/> Bentonite <input type="checkbox"/> Other _____<br>Grout Plug Intervals: From <u>3</u> ft. to <u>23</u> ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.<br>What is the nearest source of possible contamination:<br><div style="display: flex; justify-content: space-between;"><div><input type="checkbox"/> Septic tank<br/><input type="checkbox"/> Sewer lines<br/><input type="checkbox"/> Watertight sewer lines<br/><input type="checkbox"/> Lateral lines<br/><input type="checkbox"/> Cess pool</div><div><input type="checkbox"/> Seepage pit<br/><input type="checkbox"/> Pit privy<br/><input type="checkbox"/> Sewage lagoon<br/><input type="checkbox"/> Feedyard<br/><input type="checkbox"/> Livestock pens</div><div><input type="checkbox"/> Fuel storage<br/><input type="checkbox"/> Fertilizer storage<br/><input type="checkbox"/> Insecticide storage<br/><input type="checkbox"/> Abandoned water well<br/><input type="checkbox"/> Oil well/Gas well</div><div><input type="checkbox"/> Other (specify below) _____<br/>Direction from well? _____<br/>How many feet? _____</div></div> |    |                                  |      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                    |                               |  |                                                                                        |  |      |    |                    |      |    |                    |   |    |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| <table border="1" style="width: 100%;"><thead><tr><th>FROM</th><th>TO</th><th>PLUGGING MATERIALS</th><th>FROM</th><th>TO</th><th>PLUGGING MATERIALS</th></tr></thead><tbody><tr><td>3</td><td>23</td><td>Bentonite</td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></tbody></table>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |    |                                  |      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                    |                               |  |                                                                                        |  | FROM | TO | PLUGGING MATERIALS | FROM | TO | PLUGGING MATERIALS | 3 | 23 | Bentonite |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| FROM                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | TO | PLUGGING MATERIALS               | FROM | TO                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | PLUGGING MATERIALS |                               |  |                                                                                        |  |      |    |                    |      |    |                    |   |    |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 3                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | 23 | Bentonite                        |      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                    |                               |  |                                                                                        |  |      |    |                    |      |    |                    |   |    |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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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/year) <u>12/30/2019</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/year) <u>1/7/2020</u> under the business name of <u>GreenField Contractors, Inc.</u> by (signature) <u>Melissa D. Williams</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |    |                                  |      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                    |                               |  |                                                                                        |  |      |    |                    |      |    |                    |   |    |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

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.