

mw2

WATER WELL PLUGGING RECORD Form WWC-5P

KSA 82a-1212

ID NO.

0043544

1 LOCATION OF WATER WELL: County: <u>Sedgwick</u>	Fraction <u>NE 1/4 NW 1/4</u>	Section Number <u>31</u>	Township Number <u>27</u>	Range Number <u>2</u>
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Distance and direction from nearest town or city street address of well if located within city?

6701 E Harry ST. Wichita KS

2 WATER WELL OWNER:

Global Positioning Systems (decimal degrees, min. of 4 digits)

Latitude: _____

Longitude: _____

Elevation: _____

Datum: _____

Data Collection Method: _____

Tanyce L. Putnam REV LIV TR

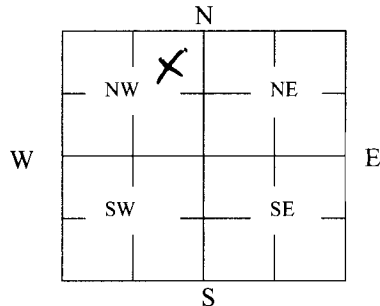
RR#, St. Address, Box #:

629 N. CREST Ridge Court

City, State ZIP Code:

Wichita KS 67230

3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:

4 DEPTH OF WELL 18.9 ft.WELL'S STATIC WATER LEVEL 13.4 ft

WELL WAS USED AS:

- 1 Domestic
2 Irrigation
3 Feedlot
4 Industrial

- 5 Public Water Supply
6 Oil Field Water Supply
7 Domestic (Lawn & Garden)
8 Air Conditioning

- 9 Dewatering
10 Monitoring
11 Injection Well
12 Other _____

Was a chemical/bacteriological sample submitted to Department? Yes _____ No X

5 TYPE OF BLANK CASING USED:

1 Steel

3 RMP (SR)

5 Wrought

7 Fiberglass

9 Other (Specify below) _____

2 PVC

4 ABS

6 Asbestos-Cement

8 Concrete Tile

Blank casing diameter 2 in. Was casing pulled? Yes X No _____ If yes, how much 3'Casing height above or below land surface 40 in.

6 GROUT PLUG MATERIAL:

1 Neat cement

2 Cement grout

3 Bentonite4 Other concreteGrout Plug Intervals: From 18.9 ft. to 1 ft., From 1 ft. to surface ft., From _____ 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

Former Fuel Storage

3 Watertight sewer lines

8 Sewage lagoon

13 Insecticide storage

4 Lateral lines

9 Feedyard

14 Abandoned water well

Direction from well? NA

5 Cess pool

10 Livestock pens

15 Oil well/Gas well

How many feet? 0

FROM	TO	PLUGGING MATERIALS	FROM	TO	PLUGGING MATERIALS
<u>18.9</u>	<u>1</u>	<u>Bentonite Chips</u>			
<u>1</u>	<u>surface</u>	<u>concrete</u>			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 4/13/11 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) 4/15/11 under the business name of Tank Management Services 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 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: 785/296-5522. Send one to Water Well Owner and retain one for your records. Visit us at <http://www.kdheks.gov/geo/waterwells>.