

WATER WELL PLUGGING RECORD Form WWC-5P

KSA 82a-1212

ID NO.

1 LOCATION OF WATER WELL: County: <u>Sedgwick</u>	Fraction <u>SE 1/4 SE 1/4 SW 1/4</u>	Section Number <u>28</u>	Township Number <u>T27S</u>	Range Number <u>2 E</u>
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Distance and direction from nearest town or city street address of well if located within city?

338 ft. north of E. Harry St and 541' west of Todd St., Wichita.

2 WATER WELL OWNER:

Ray Lowen

RR#, St. Address, Box #:

10105 E. Lincoln St.

City, State ZIP Code:

Wichita, KS. 67207

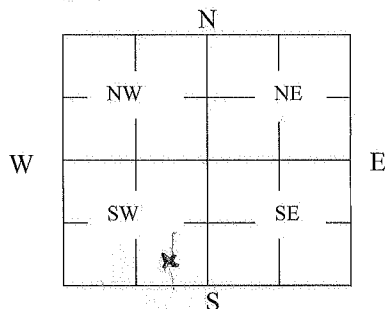
Global Positioning Systems (decimal degrees, min. of 4 digits)

Latitude: N 37° 39.935'Longitude: W 097° 13.206'Elevation: 1362

Datum:

Data Collection Method: Garmin

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

4 DEPTH OF WELL 25 ft.WELL'S STATIC WATER LEVEL 15 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

StoneBlank casing diameter 48 in. Was casing pulled? Yes ✓ No _____ If yes, how much _____Casing height above or below land surface 68 in.

6 GROUT PLUG MATERIAL:

1 Neat cement

2 Cement grout

3 Bentonite

4 Other

Grout Plug Intervals: From 6 ft. to 5 ft., From _____ ft. to _____ 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

3 Watertight sewer lines

8 Sewage lagoon

13 Insecticide storage

4 Lateral lines

9 Feedyard

14 Abandoned water well

Direction from well? North

5 Cess pool

10 Livestock pens

15 Oil well/Gas well

How many feet? 181

FROM	TO	PLUGGING MATERIALS	FROM	TO	PLUGGING MATERIALS
<u>25'</u>	<u>15'</u>	<u>Coarse washed sand</u>			
<u>15'</u>	<u>6'</u>	<u>Stone and sand</u>			
<u>6'</u>	<u>5'</u>	<u>Cement grout</u>			
<u>5'</u>	<u>0'</u>	<u>Backfill</u>			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 9/14/13 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) 9/16/2013 under the business name of _____ by (signature) Ray Lowen

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>.