

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 ¼ NW ¼ SW ¼	12	28 S	1 E
Distance and direction from nearest town or city street address of well if located within city? 3801 S. Oliver, East of Boeing Building 4-23L, Wichita, KS				
2 WATER WELL OWNER: Boeing Company		Board of Agriculture, Division of Water Resources		
RR#, St. Address, Box # P.O. Box 7730		Application Number:		
City, State, ZIP Code : Wichita, KS 67277-7730				

3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4 DEPTH OF WELL 60.0 ft.												
N <table border="1" style="margin: auto; border-collapse: collapse;"> <tr> <td style="width: 50px; height: 50px;"></td> <td style="width: 50px; height: 50px;"></td> </tr> <tr> <td style="text-align: center;">NW</td> <td style="text-align: center;">NE</td> </tr> <tr> <td style="text-align: center;">X W</td> <td style="text-align: center;">SE</td> </tr> <tr> <td style="text-align: center;">S</td> <td style="text-align: center;">E</td> </tr> </table>			NW	NE	X W	SE	S	E	WELL'S STATIC WATER LEVEL 15.54 ft.				
	NW	NE											
	X W	SE											
S	E												
	WELL WAS USED AS:												
	<table style="width:100%;"> <tr> <td>1 Domestic</td> <td>5 Public Water Supply</td> <td>9 Dewatering</td> </tr> <tr> <td>2 Irrigation</td> <td>6 Oil Field Water Supply</td> <td>10 Monitoring Well</td> </tr> <tr> <td>3 Feedlot</td> <td>7 Lawn and Garden (domestic)</td> <td>11 Injection Well</td> </tr> <tr> <td>4 Industrial</td> <td>8 Air Conditioning</td> <td>12 Other Recovery Well</td> </tr> </table>	1 Domestic	5 Public Water Supply	9 Dewatering	2 Irrigation	6 Oil Field Water Supply	10 Monitoring Well	3 Feedlot	7 Lawn and Garden (domestic)	11 Injection Well	4 Industrial	8 Air Conditioning	12 Other Recovery Well
1 Domestic	5 Public Water Supply	9 Dewatering											
2 Irrigation	6 Oil Field Water Supply	10 Monitoring Well											
3 Feedlot	7 Lawn and Garden (domestic)	11 Injection Well											
4 Industrial	8 Air Conditioning	12 Other Recovery Well											

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

If yes, mo/day/yr sample was submitted _____

Water Well Disinfected: 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 ABC	6 Asbestos-Cement	8 Concrete Tile	
Blank casing diameter 5 in. Was casing pulled? Yes ___ No X If yes, how much _____				
Casing height above or below land surface 40.0 in. Overdrilled 20'.				

6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other				
Grout Plug Intervals From 1 ft. to 60.0 ft. From _____ ft. to _____ ft. From _____ ft. 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	N/A	
3 Watertight sewer lines	8 Sewage lagoon	13 Insecticide storage		
4 Lateral lines	9 Feedyard	14 Abandoned water well		
5 Cess Pool	10 Livestock pens	15 Oil well/ Gas well		
Direction from well? N/A How many feet? N/A				

FROM	TO	CODE	PLUGGING MATERIALS
0	1		Soil
1	60.0		Bentonite Chips

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/yr) 10/14/02 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 531 This Water Well Record was completed on (mo/day/yr) 11/6/02 under the business name of Geotechnical Services, Inc.	
by (signature) _____	

INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment, Bureau of Water, 1000 S W Jackson St., Ste. 420, Topeka, Kansas 66620-0001. Telephone: 785-296-3565. Send one to Water Well Owner and retain one for your records.