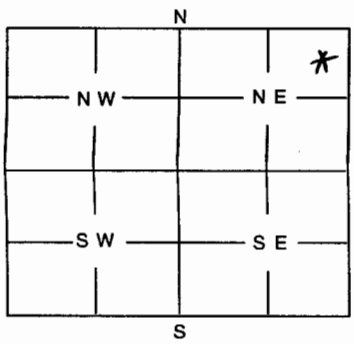
WATER WELL PLUGGING RECORD Form WWC-5P KSA 82a-1212 ID NO. _____

1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: SEDGWICK	NE ¼ NE ¼ NE ¼	5	T28S	R1E

Distance and direction from nearest town or city street address of well if located within city?
75. FEET WEST OF BROADWAY AND 400. FEET SOUTH OF PAWNEE STREET

2 WATER WELL OWNER: CITY OF WICHITA PARK DEPARTMENT — HERMAN HILL PARK WELL
RR #, St. Address, Box #: 455. N. MAIN STREET
City, State, ZIP Code : WICHITA, KS 67202
Board of Agriculture, Division of Water Resources Application Number:

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



4 DEPTH OF WELL 34 ft
WELL'S STATIC WATER LEVEL 16 ft.
WELL WAS USED AS:

1 Domestic	(5) Public Water Supply	9 Dewatering
2 Irrigation	6 Oil Field Water Supply	10 Monitoring Well
3 Feedlot	7 Domestic (Lawn & Garden)	11 Injection Well
4 Industrial	8 Air Conditioning	12 Other

Was a chemical / bacteriological sample submitted to Department? Yes ..... No ✓
If yes, mo/day/yr sample was submitted .....
Water Well Disinfected: Yes ✓ No .....

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 10 in. Was casing pulled? Yes ..... No ✓ If yes, how much .....
Casing height above or below land surface 12 in. CUT 3' BELOW GROUND SURFACE

6 GROUT PLUG MATERIAL: 1 Neat cement (2) Cement grout 3 Bentonite (4) Other CHLORINATED SAND
Grout Plug Intervals: (1) From 16 ft. to 34 ft., (2) From 0 ft. to 16 ft., From ..... to ..... ft.

What is the nearest source of possible contamination: N/A

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	
5 Cess Pool	10 Livestock pens	15 Oil well/Gas well	

Direction from well? ..... How many feet? .....

FROM	TO	PLUGGING MATERIALS
0	16	BENTONITE GROUT
16	34	CHLORINATED SAND

RECEIVED
NOV 01 2004
BUREAU OF WATER

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) OCTOBER 18, 2004 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 581 This Water Well Record was completed on (mo/day/year) 10-29-04 under the business name of LAYNE CHRISTENSEN COMPANY by (signature) [signature]

INSTRUCTIONS: Use typewriter or ball point 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, Topeka, Kansas 66620-0001. Telephone: 785/296-3565. Send one to Water Well Owner and retain one for your records.