

## WATER WELL PLUGGING RECORD Form WWC-5P

KSA 82a-1212

ID NO.

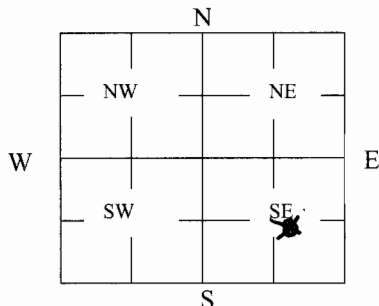
1 LOCATION OF WATER WELL: Fraction Section Number Township Number Range Number  
 County: Se. D9W, C1E Ne. 4 Center SE 1/4 13 28 1 10

Distance and direction from nearest town or city street address of well if located within city?

SOUTH EAST EDGE OF McCONNELL AFB - WICHITA, KS

2 WATER WELL OWNER: Kan-g. Building Global Positioning Systems (decimal degrees, min. of 4 digits  
 RR#, St. Address, Box #: 40 SNOODGRASS + S. 1375 Latitude: \_\_\_\_\_  
 City, State ZIP Code: 5700 GEORGE WASHINGTON Longitude: \_\_\_\_\_  
WICHITA KS 67210 Elevation: \_\_\_\_\_  
 Datum: \_\_\_\_\_  
 Data Collection Method: \_\_\_\_\_

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



A DEPTH OF WELL 275 ft. AT 60 Holes

WELL'S STATIC WATER LEVEL 15 ft

WELL WAS USED AS:

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

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    |
| 2 PVC   | 4 ABS      | 6 Asbestos-Cement | 8 Concrete Tile |

9 Other (Specify below)

1" SDR 9 Polyethylene

Blank casing diameter 1" in. Was casing pulled? Yes \_\_\_\_\_ No X If yes, how much \_\_\_\_\_  
 Casing height above or below land surface 60 in.

6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite/SAND 4 Other \_\_\_\_\_

Grout Plug Intervals: From 5 ft. to 275 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 <u>Watertight sewer lines</u> | 8 Sewage lagoon   | 13 Insecticide storage  |                                  |
| 4 Lateral lines                 | 9 Feedyard        | 14 Abandoned water well | Direction from well? <u>EAST</u> |
| 5 Cess pool                     | 10 Livestock pens | 15 Oil well/Gas well    | How many feet? <u>100'</u>       |

| FROM     | TO         | PLUGGING MATERIALS                     | FROM | TO | PLUGGING MATERIALS |
|----------|------------|----------------------------------------|------|----|--------------------|
| <u>0</u> | <u>5</u>   | <u>Top Soil</u>                        |      |    |                    |
| <u>4</u> | <u>5</u>   | <u>SAND</u>                            |      |    |                    |
| <u>5</u> | <u>275</u> | <u>BENTONITE SAND - ENHANCED GROUT</u> |      |    |                    |
|          |            |                                        |      |    |                    |
|          |            |                                        |      |    |                    |
|          |            |                                        |      |    |                    |

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 10-15-09 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 138. This Water Well Record was completed on (mo/day/year) 10-26-09 under the business name of PETERSON Irrigation by (signature) Mike Peterson

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>.