

1 LOCATION OF WATER WELL: County: Sedgwick	Fraction NE ¼ NE ¼ NE ¼ NE ¼	Section Number 29	Township Number T 28 S	Range Number 1 ☒ E ☐ W
--	---------------------------------	----------------------	---------------------------	--

Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here ☒

Global Positioning Systems (GPS) information:

Latitude: NA (in decimal degrees)

Longitude: NA (in decimal degrees)

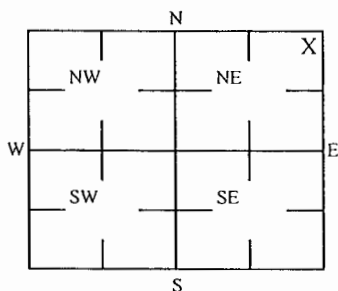
Elevation: NA

Horizontal Datum ☐ WGS84, ☐ NAD83, ☐ NAD27

Collection Method:

☐ GPS unit (Make/model: _____)☐ Digital Map/Photo, ☐ Topographic Map ☐ Land SurveyEst. Accuracy: ☐ <3 m, ☐ 3-5 m, ☐ 5-15 m, ☐ >15 m

2 WATER WELL OWNER: QuikTrip Corporation
RR#, St. Address, Box #: 5611 S Broadway
City, State ZIP Code: Wichita, KS 67217

3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:**4 DEPTH OF WELL** 19.0 ft. MW3

WELL'S STATIC WATER LEVEL NA ft

WELL WAS USED AS:

☐ Domestic
☐ Irrigation
☐ Feedlot
☐ Industrial

☐ Public Water Supply
☐ Oil Field Water Supply
☐ Domestic (Lawn & Garden)
☐ Air Conditioning

☐ Dewatering
☒ Monitoring
☐ Injection Well
☐ Other _____
Was a chemical/bacteriological sample submitted to Department? Yes ☐ No ☒**5 TYPE OF BLANK CASING USED:**
☐ Steel
☒ PVC

☐ RMP (SR)
☐ ABS

☐ Wrought
☐ Asbestos-Cement

☐ Fiberglass
☐ Concrete Tile
☐ Other (Specific below) _____

Blank casing diameter 2 in.

Was casing pulled? Yes ☒ No ☐ If yes, how much 3'

Casing height above or below land surface NA in.

6 GROUT PLUG MATERIAL: ☐ Neat cement ☐ Cement grout ☒ Bentonite ☒ Other Concrete: 0-0.5'; Soil: 0.5-3'

Grout Plug Intervals: From 3 ft to 19.0 ft, From _____ ft to _____ ft, From _____ ft to _____ ft,

What is the nearest source of possible contamination:

☐ Septic tank
☐ Sewer lines
☐ Watertight sewer lines
☐ Lateral lines
☐ Cess pool

☐ Seepage pit
☐ Pit privy
☐ Sewage lagoon
☐ Feed yard
☐ Livestock pens

☐ Fuel storage
☐ Fertilizer storage
☐ Insecticide storage
☐ Abandoned water well
☐ Oil well/Gas well
☐ Other (specify below) _____Direction from well? _____
How many feet? _____

FROM	TO	PLUGGING MATERIALS	FROM	TO	PLUGGING MATERIALS
0	0.5	Concrete			
0.5	3	Soil			
3	19.0	Bentonite			

Notes: KDHE ID: QuikTrip #378; U2-087-01342

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:

This water well was plugged under my jurisdiction and was completed on (mo/day/year) 4/7/2021 and this record is true to the best of my knowledge and belief. Kansas Water Contractor's License No. 757. This Water Well Record was completed on (mo/day/year) 4/7/2021 under the business name of Larsen & Associates, Inc. By (signature) _____

Send one white copy to Kansas Department of Health & Environment, Geology Section, 000 SW Jackson Street, Ste. 420, Topeka, KS 66612-1367. Send one copy to WATER WELL OWNER and retain one for your records
Visit us at <http://www.kdheks.gov/waterwell/index.html> Telephone 785-296-5524.