

LF 34-MW24

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

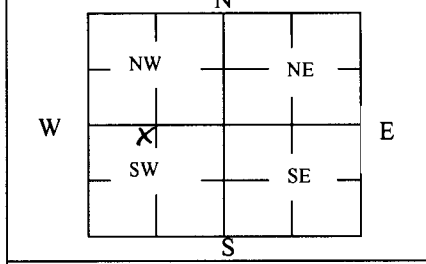
[Empty box for ID number]

1 LOCATION OF WATER WELL: County: Sedgwick Fraction: 1/4 NE 1/4 NW 1/4 SW 1/4 Section Number: 7 Township Number: T 28 S Range Number: 2 [X] E [] W

Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: Wichita, KS

Global Positioning Systems (GPS) information: Latitude: 37.62548 Longitude: 97.25800 Elevation: Datum: [X] WGS84, [] NAD83, [] NAD27 Collection Method: [X] GPS unit (Make/Model: Garmin 60C)

2 WATER WELL OWNER: 22 CEI/CEIER RR#, St. Address, Box #: 15657830 Pittsburg St., St City, State ZIP Code: McConnell AFB, KS 67221



4 DEPTH OF WELL 31 ft. WELL'S STATIC WATER LEVEL _____ ft. WELL WAS USED AS: [] Domestic [] Irrigation [] Feedlot [] Industrial [] Public Water Supply [] Oil Field Water Supply [] Domestic (Lawn & Garden) [] Air Conditioning [] Dewatering [X] Monitoring [] Injection Well [] Other _____ Was a chemical/bacteriological sample submitted to Department? Yes [] No [X]

5 TYPE OF BLANK CASING USED: [X] Steel [] PVC [] RMP (SR) [] ABS [] Wrought [] Asbestos-Cement [] Fiberglass [] Concrete Tile [] Other (Specify below) Blank casing diameter 2 in. Was casing pulled? Yes [X] No [] If yes, how much 20' Casing height above or below land surface -2 in.

6 GROUT PLUG MATERIAL: [X] Neat cement [] Cement grout [] Bentonite [] Other _____ Grout Plug Intervals: From 31 ft. to 3 ft., From _____ ft. to _____ ft., From _____ 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 [] Feedyard [] Livestock pens [] Fuel Storage [] Fertilizer storage [] Insecticide storage [] Abandoned water well [] Oil well/Gas well [] Other (specify below) Direction from well? _____ How many feet? _____

Table with columns: FROM, TO, PLUGGING MATERIALS. Row 1: 31, 3, Neat Cement. Row 2: 3, 0, Topsoil.

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 10/15/2014 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 710. This Water Well Record was completed on (mo/day/year) 12/6/2014 under the business name of Below Ground Surface, Inc. by (signature) [Signature]

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: 785/296-5524. Send one to Water Well Owner and retain one for your records. Visit us at http://www.kdheks.gov/waterwell/index.html.

Check one: [] White Copy [] Blue Copy [] Pink Copy