FTOG-MW18 WATER WELL PLUGGING RECORD Form WWC-5P KSA 82a-1212 Section Number LOCATION OF WATER WELL: Fraction Township Number Range Number **Z**E □W County: Sedgwick 2 Street/Rural Address of Well Location; if unknown, distance & Global Positioning Systems (GPS) information: Latitude: 37.62118 (in decimal degrees) direction from nearest town or intersection: If at owner's address, Longitude: 97.24770 (in decimal degrees) check here Well located within McConnell AFB, Elevation: **✓** WGS84, □ NAD83, □ NAD27 Datum: Wichita, KS Collection Method: GPS unit (Make/Model: Garmin 60C
Digital Map/Photo, Topographic Map, Land Survey WATER WELL OWNER: 22 CEI/CEIER RR#, St. Address, Box #: 15657830 Pittsburg St., St City, State ZIP Code: McConnell AFB, KS 67221 Est. Accuracy: \square < 3 m. \square 3-5 m. \square 5-15 m. \square > 15 m MARK WELL'S LOCATION WITH AN "X" IN SECTION DEPTH OF WELL 26 ft. BOX: WELL'S STATIC WATER LEVEL WELL WAS USED AS: NW **Public Water Supply** NE · Domestic Dewatering Irrigation Oil Field Water Supply Monitoring W Ε Feedlot Domestic (Lawn & Garden) Injection Well Industrial Air Conditioning Other SW SE Was a chemical/bacteriological sample submitted to Department? Yes No 📝 TYPE OF BLANK CASING USED: Unter (Specify below) Steel RMP (SR) Wrought Fiberglass **✓** PVC Asbestos-Cement Concrete Tile ABS Blank casing diameter 2 in. Was casing pulled? Yes No I If yes, how much 16 Casing height above or below land surface -2 in. ✓ Neat cement Cement grout Bentonite Other ____ **GROUT PLUG MATERIAL:** From 26 ft. to 3 ft., Grout Plug Intervals: From ____ ft. to ___ ft., From to ft. What is the nearest source of possible contamination: Septic tank Seepage pit Fuel Storage Other (specify below) Sewer lines Pit privy Fertilizer storage Watertight sewer lines Sewage lagoon Insecticide storage Lateral lines Feedyard Abandoned water well Direction from well? Cess pool Livestock pens Oil well/Gas well How many feet? FROM TO PLUGGING MATERIALS FROM TO PLUGGING MATERIALS 26 3 **Neat Cement** 0 3 Topsoil 7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 10/23/2014 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) 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