ST17-MW11 WATER WELL PLUGGING RECORD Form WWC-5P KSA 82a-1212 ID NO. LOCATION OF WATER WELL: Fraction Section Number | Township Number Range Number 1/4 SE 1/4 NW 1/4 County: Sedgwick T 28s Street/Rural Address of Well Location; if unknown, distance & Global Positioning Systems (GPS) information: Latitude: 37.62952 direction from nearest town or intersection: If at owner's address. (in decimal degrees) Longitude: 97. 25512 (in decimal degrees) Elevation: **✓** WGS84, NAD83. Datum: □ NAD27 Wichita, KS Collection Method: GPS unit (Make/Model: Garmin 60C WATER WELL OWNER: 22 CEI/CEIER ☐ Digital Map/Photo, ☐ Topographic Map, ☐ Land Survey RR#, St. Address, Box #: 15657830 Pittsburg St., St City, State ZIP Code: Est. Accuracy: \square < 3 m, \square 3-5 m, \square 5-15 m, \square > 15 m McConnell AFB, KS 67221 MARK WELL'S LOCATION WITH AN "X" IN SECTION DEPTH OF WELL 15.5 3 ft. BOX: WELL'S STATIC WATER LEVEL____ WELL WAS USED AS: - NE Domestic **Public Water Supply** 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: RMP (SR) Wrought Steel **Fiberglass** Other (Specify below) **|√**| PVC ABS ☐ Asbestos-Cement Concrete Tile Blank casing diameter 2 in. Was casing pulled? Yes No If yes, how much 5.5 feet Casing height above or below land surface -2 Neat cement Cement grout Bentonite Other____ **GROUT PLUG MATERIAL:** From 15.5 ft. to 1.5 ft., From _____ ft. to _____ft., Grout Plug Intervals: From _____ to ____ ft. What is the nearest source of possible contamination: Septic tank Fuel Storage Seepage pit Other (specify below) Sewer lines Fertilizer storage Pit privy Watertight sewer lines Sewage lagoon Insecticide storage Direction from well? Lateral lines Feedyard Abandoned water well Cess pool Livestock pens How many feet? Oil well/Gas well **FROM** PLUGGING MATERIALS TO FROM ТО PLUGGING MATERIALS 15.5 1.5 **Neat Cement** 0 1.5 Topsoil CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 08/04/2015 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) 10/25/2015 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