Borney WATER WELL PLUGGING RECORD Form WWC-5P KSA 82a-1212 Township Number Range Number LOCATION OF WATER WELL: Section Number T / 6 TE DW County: WICHITA Global Positioning Systems (GPS) information: Street/Rural Address of Well Location; if unknown, distance & Latitude: (in decimal degrees) direction from nearest town or intersection: If at owner's address, Longitude: (in decimal degrees) check here Elevation: WGS84. NAD83. Datum: NAD27 Collection Method: 515 Country Store GPS unit (Make/Model: WATER WELL OWNER: do Gary Berning ☐ Digital Map/Photo, ☐ Topographic Map, ☐ Land Survey RR#, St. Address, Box #: 309 S. Carter City, State ZIP Code: Est. Accuracy: \square <3 m, \square 3-5 m, \square 5-15 m, \square > 15 m epti KS 67861 MARK WELL'S LOCATION WITH AN "X" IN SECTION 4 DEPTH OF WELL 0.0 BOX: WELL'S STATIC WATER LEVEL WELL WAS USED AS: NW Domestic Public Water Supply Dewatering NE Irrigation Oil Field Water Supply Monitoring W E 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: Other (Specify below) RMP (SR) Fiberglass Steel Wrought PVC Asbestos-Cement Concrete Tile ABS ____in. Was casing pulled? Yes lacksquare No lacksquare If yes, how much 32Blank casing diameter Casing height above or below land surface 32 in. Neat cement Cement grout Bentonite Other **GROUT PLUG MATERIAL:** From \mathcal{B} ft. to \mathcal{S} ft. From $\frac{1}{65}$ ft. to $\frac{40}{10}$ ft., From $\frac{40}{10}$ ft. to $\frac{1}{10}$ ft., **Grout Plug Intervals:** 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 Direction from well? 5 iv Lateral lines Feedvard Abandoned water well How many feet? $5\overline{2}$ Cess pool Livestock pens Oil well/Gas well **FROM PLUGGING MATERIALS** FROM TO PLUGGING MATERIALS TO 165 Sare 4 o and ₩ CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 1 3 17 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. ______. This Water Well Record was completed on (mo/day/year), 13 17 under the business name of Tenes craitersem 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.