WATER WELL PLUGGING RECORD Form WWC-5P KSA 82a-1212

1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: SEDGWICK	SW 1/4 SW 1/4 SE 1/4	31	26	1W

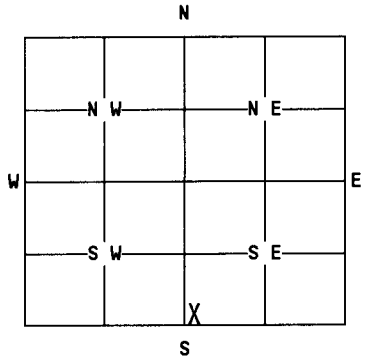
Distance and direction from nearest town or city street address of well if located within city?
1 MI. NORTH & ½ MI. WEST OF 21ST ST. & MAIZE RD., WICHITA KANSAS

2 WATER WELL OWNER: DAVID D. CRANMER, CRANMER GRASS FARMS

RR#, St. Address, Box #: 6121 N. 119TH WEST
City, State, ZIP Code : MAIZE, KS 67101

Board of Agriculture, Division of Water Resources
Application Number: N/A

3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:



4 DEPTH OF WELL....137.....ft.

WELL'S STATIC WATER LEVEL....31.....ft.

WELL WAS USED AS:

1 Domestic 5 Public Water Supply 9 Dewatering
2 Irrigation 6 Oil Field Water Supply 10 Monitoring Well
3 Feedlot 7 Lawn and Garden Only 11 Injection Well
4 Industrial 8 Air Conditioning 12 Other.....

Was a chemical/bacteriological sample submitted to Department? Yes....No. X.
If yes, mo/day/yr sample was submitted.....

Water Well Disinfected: Yes..... No..X...

5 TYPE OF BLANK CASING USED:

1 Steel 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (specify below)
2 PVC 4 ABS 6 Asbestos-Cement 8 Concrete Tile .....

Blank casing diameter....4.....in. Was casing pulled? Yes..X... No..... If yes, how much.137'.....
Casing height above or below land surface....N/A.....in.

6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other.....

Grout Plug Intervals: From..16.ft. to..3....ft., From.....ft. to .....ft., From..... to.....ft.

What is the nearest source of possible contamination:

1 Septic tank 6 Seepage pit 11 Fuel storage 16 Other (specify below)
2 Sewer lines 7 Pit privy 12 Fertilizer storage -CHEMIGATION TANK.....
3 Watertight sewer lines 8 Sewage lagoon 13 Insecticide storage
4 Lateral lines 9 Feedyard 14 Abandoned water well
5 Cess Pool 10 Livestock pens 15 Oil well/Gas well

Direction from well? ...SOUTH..... How many feet? 15-20.....

FROM	TO	PLUGGING MATERIALS
137	16	FORMATION MATERIAL FROM
		BOREHOLE COLLAPSE
16	3	BENTONITE HOLEPLUG
3	0	TOPSOIL

PLUGGING WITNESSED BY D. KOCI
GROUNDWATER MANAGEMENT DISTRICT NO. 2

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year)....7/13/99..... and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. ....N/A..... This Water Well Record was completed on (mo/day/year) X.....7/14/99..... under the business name of ....N/A.....
by (signature) X.....

INSTRUCTIONS: Use typewriter or ball point 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, Topeka, Kansas 66620-0001. Telephone: 913/296-3565. Send one to Water Well Owner and retain one for your records.

EQUUS BEDS GROUNDWATER MANAGEMENT DISTRICT NO. 2

313 SPRUCE • HALSTEAD, KANSAS 67056-1925 • equusbed@ink.org • VOICE (316) 835-2224 • FAX (316) 830-2210

July 19, 1999

Richard Harper
Kansas Department of Health and Environment
Bureau of Water
Forbes Field, Bldg. 740
Topeka, Kansas 66620-0001

RE: Abandoned Water Wells - 354.422

Dear Richard:

The enclosed WWC-5P form was received by the Groundwater Management District No. 2 office on July 19, 1999. The District is forwarding the form to your office on behalf of the water well owner.

Sincerely,
EQUUS BEDS GROUNDWATER
MANAGEMENT DISTRICT NO. 2

Donald R. Koci
Hydrologist

DRK/rk
Enclosure

pc: David Cranmer