

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

1 LOCATION OF WATER WELL: County: Sedgwick Distance and direction from nearest town or city street address of well if located within city? Approximately 4400 N. West St., Wichita	Fraction SW ¼ SE ¼ NW ¼	Section Number 25	Township Number 26	Range Number 1 W																																										
2 WATER WELL OWNER: City of Wichita RR#, St. Address, Box #: 455 N. Main St. City, State, ZIP Code: Wichita, KS 67202																																														
Global Positioning System (decimal degrees, min. of 4 digits) Latitude: _____ Longitude: _____ Elevation: _____ Datum: _____ Data Collection Method: _____																																														
3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX: 	4 DEPTH OF WELL <u>46.3</u> ft. WELL'S STATIC WATER LEVEL <u>14.3</u> ft. WELL WAS USED AS: <table style="width:100%; border: none;"> <tr> <td style="width:33%;">1 Domestic</td> <td style="width:33%;">5 Public Water Supply</td> <td style="width:33%;">9 Dewatering</td> </tr> <tr> <td>2 Irrigation</td> <td>6 Oil Field Water Supply</td> <td>10 <u>Monitoring</u></td> </tr> <tr> <td>3 Feedlot</td> <td>7 Domestic (Lawn & Garden)</td> <td>11 Injection Well</td> </tr> <tr> <td>4 Industrial</td> <td>8 Air Conditioning</td> <td>12 Other _____</td> </tr> </table> Was a chemical/bacteriological sample submitted to Department? Yes ___ No <u>X</u>				1 Domestic	5 Public Water Supply	9 Dewatering	2 Irrigation	6 Oil Field Water Supply	10 <u>Monitoring</u>	3 Feedlot	7 Domestic (Lawn & Garden)	11 Injection Well	4 Industrial	8 Air Conditioning	12 Other _____																														
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5 TYPE OF BLANK CASING USED: 1 Steel 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (Specify below) 2 <u>PVC</u> 4 ABS 6 Asbestos-Cement 8 Concrete Tile																																														
Blank casing diameter <u>2</u> in. Was casing pulled? Yes <u>X</u> No ___ If yes, how much <u>All</u> Casing height above or <u>below</u> land surface <u>NA</u> in.																																														
6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 <u>Bentonite</u> 4 Other <u>Soil</u>																																														
Grout Plug Intervals: From <u>46.3</u> ft. to <u>0.5</u> ft., From <u>0.5</u> ft. to <u>0</u> ft., From _____ to _____ ft.																																														
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7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) <u>09/27/07</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>531</u> . This Water Well Record was completed on (mo/day/year) <u>10/25/07</u> under the business name of <u>Geotechnical Services, Inc.</u> by (signature) <u>[Signature]</u>																																														
INSTRUCTIONS: Please fill in blanks 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: 785/296-5522. Send one to Water Well Owner and retain one for your records. Visit us at http://www.kdheks.gov/waterwell .																																														