

# WATER WELL PLUGGING RECORD Form WWC-5P

KSA 82a-1212

MW-1  
ID NO.

KGS Record  
Number: 331777

<b>1 LOCATION OF WATER WELL:</b> County: <b>Sedgwick</b> Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here <input type="checkbox"/> <b>4300 W 37th St Wichita, KS 67205</b> <b>NW corner of West St &amp; 37th St N Wichita, KS</b>	Fraction <b>SE 1/4 SE 1/4 SE 1/4 SE 1/4</b>	Section Number <b>26</b>	Township Number <b>T 26 S</b>	Range Number <b>1</b> <input type="checkbox"/> E <input checked="" type="checkbox"/> W																																																
<b>2 WATER WELL OWNER: C&amp;D Recyclers, Inc.</b> RR#, St. Address, Box #: <b>P.O. Box 7717</b> City, State ZIP Code: <b>Wichita, KS 67277</b>		<b>Global Positioning Systems (GPS) Information:</b> Latitude: <b>37.7527</b> (in decimal degrees) Longitude: <b>-97.3940</b> (in decimal degrees) Elevation: <b>1332</b> Datum: <input checked="" type="checkbox"/> WGS84, <input type="checkbox"/> NAD83, <input type="checkbox"/> NAD27 Collection Method: <input type="checkbox"/> GPS unit (Make/Model: _____) <input checked="" type="checkbox"/> Digital Map/Photo, <input type="checkbox"/> Topographic Map, <input type="checkbox"/> Land Survey Est. Accuracy: <input type="checkbox"/> < 3 m, <input type="checkbox"/> 3-5 m, <input checked="" type="checkbox"/> 5-15 m, <input type="checkbox"/> > 15 m																																																		
<b>3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:</b> <div style="text-align: center;"> </div>	<b>4 DEPTH OF WELL 22 ft.</b> <b>WELL'S STATIC WATER LEVEL 21.5 ft.</b> <b>WELL WAS USED AS:</b> <div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> Domestic  <input type="checkbox"/> Irrigation  <input type="checkbox"/> Feedlot  <input type="checkbox"/> Industrial         </div> <div> <input type="checkbox"/> Public Water Supply  <input type="checkbox"/> Oil Field Water Supply  <input type="checkbox"/> Domestic (Lawn &amp; Garden)  <input type="checkbox"/> Air Conditioning         </div> <div> <input checked="" type="checkbox"/> Dewatering  <input type="checkbox"/> Monitoring  <input type="checkbox"/> Injection Well  <input type="checkbox"/> Other         </div> </div> <div style="text-align: right; font-weight: bold; font-size: 1.2em;">MW-1</div> Was a chemical/bacteriological sample submitted to Department? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>																																																			
<b>5 TYPE OF BLANK CASING USED:</b> <div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> Steel  <input checked="" type="checkbox"/> PVC         </div> <div> <input type="checkbox"/> RMP (SR)  <input type="checkbox"/> ABS         </div> <div> <input type="checkbox"/> Wrought  <input type="checkbox"/> Asbestos-Cement         </div> <div> <input type="checkbox"/> Fiberglass  <input type="checkbox"/> Concrete Tile         </div> <div> <input type="checkbox"/> Other (Specify below) _____         </div> </div> Blank casing diameter <b>2</b> in. Was casing pulled? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> If yes, how much <b>3 feet</b> Casing height above or below land surface <b>36</b> in.																																																				
<b>6 GROUT PLUG MATERIAL:</b> <input type="checkbox"/> Neat cement <input type="checkbox"/> Cement grout <input checked="" type="checkbox"/> Bentonite <input type="checkbox"/> Other _____ Grout Plug Intervals: From _____ ft. to _____ ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft. What is the nearest source of possible contamination: <div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> Septic tank  <input type="checkbox"/> Sewer lines  <input type="checkbox"/> Watertight sewer lines  <input type="checkbox"/> Lateral lines  <input type="checkbox"/> Cess pool         </div> <div> <input type="checkbox"/> Seepage pit  <input type="checkbox"/> Pit privy  <input type="checkbox"/> Sewage lagoon  <input type="checkbox"/> Feedyard  <input type="checkbox"/> Livestock pens         </div> <div> <input type="checkbox"/> Fuel storage  <input type="checkbox"/> Fertilizer storage  <input type="checkbox"/> Insecticide storage  <input type="checkbox"/> Abandoned water well  <input type="checkbox"/> Oil well/Gas well         </div> <div> <input type="checkbox"/> Other (specify below) _____          Direction from well? _____          How many feet? _____         </div> </div> <table border="1" style="width:100%; border-collapse: collapse; margin-top: 10px;"> <thead> <tr> <th>FROM</th> <th>TO</th> <th>PLUGGING MATERIALS</th> <th>FROM</th> <th>TO</th> <th>PLUGGING MATERIALS</th> </tr> </thead> <tbody> <tr> <td>0</td> <td>3</td> <td>native soil</td> <td></td> <td></td> <td></td> </tr> <tr> <td>3</td> <td>22</td> <td>bentonite</td> <td></td> <td></td> <td></td> </tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> </tbody> </table>					FROM	TO	PLUGGING MATERIALS	FROM	TO	PLUGGING MATERIALS	0	3	native soil				3	22	bentonite																																	
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<b>7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:</b> This water well was plugged under my jurisdiction and was completed on (mo/day/year) <b>01/16/2014</b> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <b>416</b> . This Water Well Record was completed on (mo/day/year) <b>01/16/2014</b> under the business name of <b>Terracon Consultants Inc.</b> 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>.

mw-1

# MW-1

**plugged and abandoned 1/16/2015**

<b>Location Info</b>	
County: Sedgwick	Location: T26S, R1W, Sec. 26, SE SE SE
Owner: C & D Recyclers	Status: Constructed
Directions: NW corner of W St & 37th St N, Wichita	
Longitude: -97.3905833	Latitude: 37.7533543
Longitude and latitude calculated by Survey from township-range-section-quarter calls. Only good to within the quarter call accuracy.	
View well on interactive map This link will create a new window and display an interactive map of this well and its neighbors.	
<b>General Info</b>	
Well Depth: 25 ft	Elevation: ft
Static Water Level: 13.5 ft	Est. Yield: gpm.
Well Use: Monitoring well/observation/piezometer	
DWR Applic. #:	Other ID: MW 1
<b>Driller Info</b>	
Driller: Andic Thornburg	License #: 654
Comp. Date: 10-Jul-2002	