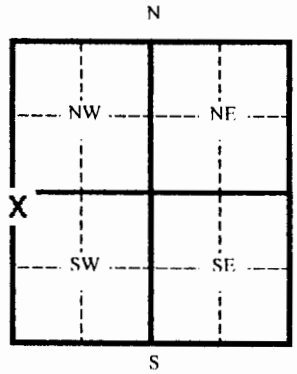
WATER WELL PLUGGING RECORD FORM WWC-5P KSA 82a-1212 **AS-2-20**

1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: **Sedgwick**	**NW ¼ NW ¼ SW ¼**	**1**	**26**	**2[redacted] W**

Distance and direction from nearest town or city street address of well if located within city?
N 135th Street West

2 WATER WELL OWNER: **Shell Oil Products US**
RR#, St. Address, Box # **PO Box 1087** Board of Agriculture, Division of Water Resources
City, State, ZIP Code : **Huffman, TX 77336** Application Number:

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



4 DEPTH OF WELL **20** ft.

WELL'S STATIC WATER LEVEL **NA** 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 (domestic) 11 Injection Well
4 Industrial 8 Air Conditioning 12 Other **Air Sparge**

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 ABC 6 Asbestos-Cement 8 Concrete Tile
Blank casing diameter **2** in. Was casing pulled? Yes ___ No **X** If yes, how much ___

Casing height above or below land surface **-60** in.

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

Grout Plug Intervals From **20** ft. to **6** ft. From ___ ft. to ___ ft. From ___ ft. 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 **None**
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? ___ How many feet? ___

FROM	TO	CODE	PLUGGING MATERIALS
20	**6**		**Bentonite**
6	**3**		**Clay**
0	**3**		**Cement**

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/yr) **1-14-08** and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **783** This Water Well Record was completed on (mo/day/yr) **4-1-08** under the business name of **Woofter Pump & Well Inc.**
by (signature) [signature]

INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment, Bureau of Water, Topeka, Kansas 66620-0001. Telephone: 785-296-3565. Send one to Water Well Owner and retain one for your records.

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