

WATER WELL PLUGGING RECORD

FORM WWC-5P

KSA 82a-1212 MW- 12

1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: Sedgwick	NW ¼ NW ¼ SW ¼	1	26	26

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

2 WATER WELL OWNER: Shell Oil Products US RR#, St. Address, Box # PO Box 1087 City, State, ZIP Code : Huffman, TX 77336	Board of Agriculture, Division of Water Resources Application Number:
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3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:

4 DEPTH OF WELL **14** ft.
 WELL'S STATIC WATER LEVEL **NA** ft.
 WELL WAS USED AS:

1 Domestic
 2 Irrigation
 3 Feedlot
 4 Industrial

5 Public Water Supply
 6 Oil Field Water Supply
 7 Lawn and Garden (domestic)
 8 Air Conditioning

9 Dewatering
 10 Monitoring Well
 11 Injection Well
 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
 2 PVC

3 RMP (SR)
 4 ABC

5 Wrought
 6 Asbestos-Cement

7 Fiberglass
 8 Concrete Tile

9 Other (specify below)

 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 **14** ft. to **6** ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.
 What is the nearest source of possible contamination:

1 Septic tank
 2 Sewer lines
 3 Watertight sewer lines
 4 Lateral lines
 5 Cess Pool

6 Seepage pit
 7 Pit privy
 8 Sewage lagoon
 9 Feedyard
 10 Livestock pens

11 Fuel storage
 12 Fertilizer storage
 13 Insecticide storage
 14 Abandoned water well
 15 Oil well/ Gas well

16 Other (specify below)
None

 Direction from well? _____ How many feet? _____

FROM	TO	CODE	PLUGGING MATERIALS
14	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)

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.