

Plugging MW-10

1	LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
	County: <u>Sedgewick</u>	<u>NW 1/4 NW 1/4 NW 1/4</u>	<u>27</u>	<u>27 S</u>	<u>1 W</u>

Distance and direction from nearest town or city street address of well if located within city?

Maple 3 Ridge Rd, Wichita, KS

2	WATER WELL OWNER:	Board of Agriculture, Division of Water Resources
	<u>Southwest Bank</u>	
	RR #, St. Address, Box #:	Application Number:
	<u>PO Box 2878</u>	
	City, State, ZIP Code:	
	<u>Wichita, KS</u>	

3	MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4	DEPTH OF WELL <u>55</u> ft
		WELL'S STATIC WATER LEVEL <u>22.91</u> ft. WELL WAS USED AS: 1 Domestic 5 Public Water Supply 9 Dewatering 2 Irrigation 6 Oil Field Water Supply 10 <u>Monitoring Well</u> 3 Feedlot 7 Domestic (Lawn & Garden) 11 Injection Well 4 Industrial 8 Air Conditioning 12 Other _____	
		Was a chemical / bacteriological sample submitted to Department? Yes <u>X</u> No _____ If yes, mo/day/yr sample was submitted _____ Water Well Disinfected: Yes <u>X</u> No _____	

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>3 ft</u> Casing height above or below land surface _____ in.

6	GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 <u>Bentonite</u> 4 Other _____ Grout Plug Intervals: From <u>3</u> ft. to <u>22</u> 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 12 <u>Other (specify below)</u> 2 Sewer lines 7 Pit privy 12 Fertilizer storage 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? _____

Contaminated site

FROM	TO	PLUGGING MATERIALS
0	3	soils (1.26+3)
3	22	bentonite (4.142)
22	55	chlorinated sand (.719 ft ³)

7	CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) <u>5/30/00</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>585</u> This Water Well Record was completed on (mo/day/year) <u>7/11/00</u> under the business name of <u>AEI</u> by (signature) <u>Adrian Canh D.D.M.</u>
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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: 785/296-3565. Send one to Water Well Owner and retain one for your records.