

1	LOCATION OF WATER WELL:	Fraction	Section	Number	Township	Number	Range	Number
County:	Sedgwick	SW 1/4 SW 1/4 SE 1/4	23	T	28	S	R	1 E W

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

At 4770 W. 55th St. South

2	WATER WELL OWNER:	Vulcan Materials Company Chemicals Division RR#, St. Address, Box # P.O. Box 12283 City, State, ZIP Code Wichita, KS 67277	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 67 ft WELL'S STATIC WATER LEVEL 25 ft. WELL WAS USED AS: 1 Domestic 2 Irrigation 3 Feedlot 4 Industrial 5 Public Water Supply 6 Oil Field Water Supply 7 Domestic (Lawn & Garden) 8 Air Conditioning 9 Dewatering 10 Monitoring Well 11 Injection Well 12 Other
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Was a chemical / bacteriological sample submitted to Department? Yes _____ No ☒

If yes, mo/day/yr sample was submitted _____

Water Well Disinfected: Yes ☒ No _____

5	TYPE OF BLANK CASING USED:
1 Steel 2 PVC 3 RMP (SR) 4 ABS 5 Wrought 6 Asbestos-Cement 7 Fiberglass 8 Concrete Tile 9 Other (Specify below)	
Blank casing diameter 5 in. Was casing pulled? Yes _____ No ☒	
Casing height above or below land surface 48 in. If yes, how much Cut off _____	

6	GROUT PLUG MATERIAL: 1 Neat Cement 2 Cement grout 3 Bentonite 4 Other Bentonite Holeplug Grout Plug Intervals: From _____ ft. to _____ ft., From _____ ft. to _____ ft. From 67 ft. to 4 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 known
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Direction from well? _____ How many feet? _____

FROM	TO	PLUGGING MATERIALS
67	4	Bentonite Holeplug
4	0	Compacted Soil

7	CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 7-15-04 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 185 This Water Well Record was completed on (mo/day/year) 7-20-04 under the business name of Clarke Well & Equipment, Inc. <i>Clarke Well & Equipment, Inc.</i> by (signature) _____
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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 & Environment, Bureau of Water, Topeka, Kansas 66620-0001. Telephone: 785/296-3565. Send one to Water Well Owner and retain one for your records.