

WATER WELL PLUGGING RECORD

Form WWC-5P

KSA 82a-1212

ID No. 00341367

1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: Sumner	NE 1/4 SE 1/4 SE 1/4	26	31	01 W

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

77 ft S, 41 ft W of the SW corner of the hanger, north of tank basin

2 WATER WELL OWNER:	Wellington Airport Authority	Board of Agriculture, Division of Water Resources
RR#, St. Address, Box #	441 N West Road	Application Number:
City, State, ZIP Code :	Wellington KS 67152	

3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4 DEPTH OF WELL 18.45 ft. Originally drilled to 18.7 feet bgs												
	WELL'S STATIC WATER LEVEL 9.89 ft. WELL WAS USED AS: <table border="0"> <tr> <td>1 Domestic</td> <td>5 Public Water Supply</td> <td>9 Dewatering</td> </tr> <tr> <td>2 Irrigation</td> <td>6 Oil Field Water Supply</td> <td>10 Monitoring Well</td> </tr> <tr> <td>3 Feedlot</td> <td>7 Lawn and Garden (domestic)</td> <td>11 Injection Well</td> </tr> <tr> <td>4 Industrial</td> <td>8 Air Conditioning</td> <td>12 Other</td> </tr> </table>	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
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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 X	No ___	If yes, how much 18.45 ft.
Casing height above or below land surface	0.00 in.	Overdrilled to 19 ft below ground surface			

6 GROUT PLUG MATERIAL:	1 Neat cement	2 Cement grout	3 Bentonite	4 Other
Grout Plug Intervals	From 2 ft. to 14.75 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		
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
0	2		Concrete
2	14.75		Bentonite
14.75	19		Boring caved

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/yr) 8-11-05 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 531 This Water Well Record was completed on (mo/day/yr) 8-30-05 under the business name of Geotechnical Services, Inc. by (signature)
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INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment, Bureau of Water, 1000 S W Jackson St., Ste. 420, Topeka, Kansas 66620-0001. Telephone: 785-296-3565. Send one to Water Well Owner and retain one for your records.