

**WATER WELL PLUGGING RECORD Form WWC-5P KSA 82a-1212 ID NO.**

<b>1 LOCATION OF WATER WELL:</b> County: <b>Barton</b>	Fraction $\frac{1}{4}$ sw $\frac{1}{4}$ nw $\frac{1}{4}$ SW $\frac{1}{4}$	Section Number <b>19</b>	Township Number <b>T 16 S</b>	Range Number <b>11</b> <input type="checkbox"/> E <input checked="" type="checkbox"/> W
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Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here ☐ 4 East of Beaver

**Global Positioning Systems (GPS) information:**

Latitude: **38.643268** (in decimal degrees)

Longitude: **98.589314** (in decimal degrees)

Elevation:

Horizontal Datum: ☐ WGS84, ☒ NAD83, ☐ NAD27

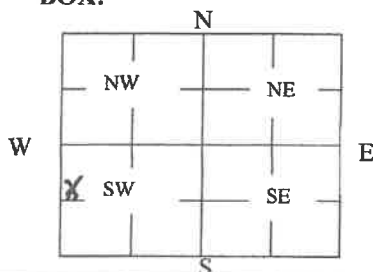
Collection Method:

☒ GPS unit (Make/Model: \_\_\_\_\_)

☐ Digital Map/Photo, ☐ Topographic Map, ☐ Land Survey

Est. Accuracy: ☐ < 3 m, ☐ 3-5 m, ☐ 5-15 m, ☐ > 15 m

**2 WATER WELL OWNER:** Brian Hoffman  
RR#, St. Address, Box #: **1938 NE 100 Avenue**  
City, State ZIP Code: **Clafin, KS 67525**

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


**4 DEPTH OF WELL** **140** ft.

WELL'S STATIC WATER LEVEL **N/A** ft

WELL WAS USED AS:

☐ Domestic  
☐ Irrigation  
☐ Feedlot  
☐ Industrial

☐ Public Water Supply  
☐ Oil Field Water Supply  
☐ Domestic (Lawn & Garden)  
☐ Air Conditioning

☐ Dewatering  
☐ Monitoring  
☐ Injection Well  
☒ Other **Stock**

Was a chemical/bacteriological sample submitted to Department? Yes ☐ No ☒

**5 TYPE OF BLANK CASING USED:**

☒ Steel ☐ RMP (SR) ☐ Wrought ☐ Fiberglass ☐ Other (Specify below)  
☐ PVC ☐ ABS ☐ Asbestos-Cement ☐ Concrete Tile

Blank casing diameter **6** in. Was casing pulled? Yes ☐ No ☒ If yes, how much \_\_\_\_\_  
Casing height above or below land surface **12** in.

**6 GROUT PLUG MATERIAL:** ☐ Neat cement ☐ Cement grout ☒ Bentonite ☐ Other \_\_\_\_\_

Grout Plug Intervals: From \_\_\_\_\_ ft. to \_\_\_\_\_ ft., From **140** ft. to **0** ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

What is the nearest source of possible contamination:

☐ Septic tank ☐ Seepage pit ☐ Fuel storage  
☐ Sewer lines ☐ Pit privy ☐ Fertilizer storage  
☐ Watertight sewer lines ☐ Sewage lagoon ☐ Insecticide storage  
☐ Lateral lines ☐ Feedyard ☐ Abandoned water well  
☐ Cess pool ☐ Livestock pens ☐ Oil well/Gas well

☒ Other (specify below)  
**House**

Direction from well? **North**  
How many feet? **100ft**

FROM	TO	PLUGGING MATERIALS	FROM	TO	PLUGGING MATERIALS
140	0	Hole plug			

**7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:** This water well was plugged under my jurisdiction and was completed on (mo/day/year) **5-7-18** and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **134**. This Water Well Record was completed on (mo/day/year) **5-31-18** under the business name of **Rosencrantz- Bemis Ent Inc** by (signature) *Dora Alejo*

Send one white copy to Kansas Department of Health & Environment, Geology Section, 1000 SW Jackson Street, Ste. 420, Topeka, KS 66612-1367. Send one copy to WATER WELL OWNER and retain one for your records.

Visit us at <http://www.kdheks.gov/waterwell/index.html> Telephone 785-296-5524.