

Well #3

20180258

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

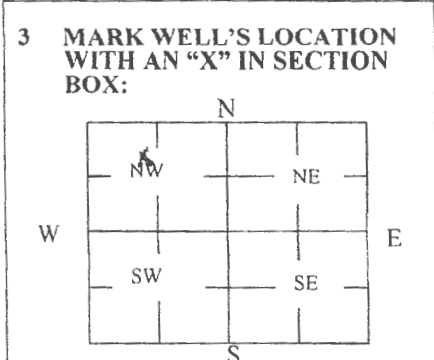
1 LOCATION OF WATER WELL: Fraction 1/4 SE 1/4 nw 1/4 NW 1/4 Section Number 32 Township Number T 19 S Range Number 13 E W
County: Barton

Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here 8th & Grant, Great Bend

Global Positioning Systems (GPS) information:
Latitude: _____ (in decimal degrees)
Longitude: _____ (in decimal degrees)
Elevation: _____
Horizontal Datum: WGS84, NAD83, NAD27
Collection Method:

2 WATER WELL OWNER: City of Great Bend
RR#, St. Address, Box #: PO Box 1168
City, State ZIP Code: Great Bend, KS 67530

GPS unit (Make/Model: _____)
 Digital Map/Photo. Topographic Map, Land Survey
Est. Accuracy: < 3 m, 3-5 m, 5-15 m, > 15 m



4 DEPTH OF WELL 40 ft.
WELL'S STATIC WATER LEVEL 9 1/2 ft
WELL WAS USED AS:
 Domestic Irrigation Public Water Supply Dewatering
 Feedlot Oil Field Water Supply Monitoring
 Industrial Domestic (Lawn & Garden) Injection Well
 Air Conditioning Other _____
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 8 in. Was casing pulled? Yes No If yes, how much 40
Casing height above or below land surface _____ in.

6 GROUT PLUG MATERIAL: Neat cement Cement grout Bentonite Other _____
Grout Plug Intervals: From _____ ft. to _____ ft., From 12 ft. to 0 ft., From _____ ft. to _____ ft.
What is the nearest source of possible contamination:
 Septic tank Seepage pit Fuel storage Other (specify below)
 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
Direction from well? West
How many feet? 200ft

FROM	TO	PLUGGING MATERIALS	FROM	TO	PLUGGING MATERIALS
40	12	Chlorinated gravel			
12	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) 11-12-18 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) 11-30-18 under the business name of Rosencrantz- Bemis Ent Inc by (signature) [Signature]

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.kansas.gov> Telephone 785-296-5524.