

**WATER WELL PLUGGING RECORD Form WWC-5P**

KSA 82a-1212

ID NO.

**1 LOCATION OF WATER WELL:**  
County: **Stafford**

Fraction **1/4 NE 1/4 SW 1/4 NE 1/4**

Section Number **11**

Township Number **T 22 S**

Range Number **13**  E  W

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

Approximately 10.5 miles north and 2 miles east of St. John.

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

Latitude: **38.155014** (in decimal degrees)

Longitude: **-98.715924** (in decimal degrees)

Elevation: **Unknown**

Datum:  WGS84,  NAD83,  NAD27

**Collection Method:**

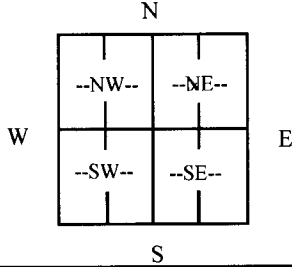
GPS unit (Make/Model: **WAAS**)

Digital Map/Photo,  Topographic Map,  Land Survey

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

**2 WATER WELL OWNER:** Betty Hullman  
RR#, St. Address, Box #: **1350 NE 10 Ave.**  
City, State ZIP Code: **St. John, KS 67576**

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



**4 DEPTH OF WELL** 98 ft.

WELL'S STATIC WATER LEVEL 22 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 \_\_\_\_\_

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

**5 TYPE OF BLANK CASING USED:**

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

Blank casing diameter 16 in. Was casing pulled? Yes  No  If yes, how much \_\_\_\_\_  
Casing height above or below land surface. \_\_\_\_\_ in.

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

Grout Plug Intervals: From 2 ft. to 22 ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft., From \_\_\_\_\_ to \_\_\_\_\_ ft.

What is the nearest source of possible contamination:

- Septic tank
- Sewer lines
- Watertight sewer lines
- Lateral lines
- Cess pool
- Seepage pit
- Pit privy
- Sewage lagoon
- Feedyard
- Livestock pens
- Fuel Storage
- Fertilizer storage
- Insecticide storage
- Abandoned water well
- Oil well/Gas well
- Other (specify below) None Known

Direction from well? \_\_\_\_\_  
How many feet? \_\_\_\_\_

FROM	TO	PLUGGING MATERIALS	FROM	TO	PLUGGING MATERIALS
0	2	Cement			
2	22	Bentonite Chips			
22	98	Chlorinated Sand & Gravel			

**7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:** This water well was plugged under my jurisdiction and was completed on (mo/day/year) 04/09/15 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) 04/14/15 under the business name of Clarke Well & Equipment, Inc. by (signature)

**INSTRUCTIONS:** Use typewriter or ballpoint 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, Geology Section, 1000 SW Jackson St., Ste. 420, Topeka, Kansas 66612-1367. Telephone: 785/296-5524. Send one to Water Well Owner and retain one for your records. Visit us at <http://www.kdheks.gov/waterwell/l-ndex.html>.