

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

6407

<b>1 LOCATION OF WATER WELL:</b> County: <b>STEVENS</b>	Fraction ¼ ¼ ¼ NW ¼	Section Number <b>34</b>	Township Number T <b>31</b> S	Range Number 37 <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  From the intersection of Hwy 25 & Y Road

3/10 mile East and approx. 750' South

**2 WATER WELL OWNER:** Brenda Blotevogel  
RR#, St. Address, Box #: **5413 Oak Forrest LN**  
City, State ZIP Code: **Tulsa Ok., 74131**

**Global Positioning Systems (GPS) information:**  
Latitude: 37.31326 N (in decimal degrees)  
Longitude: 101.33310 W (in decimal degrees)  
Elevation: \_\_\_\_\_  
Datum:  WGS84,  NAD83,  NAD27  
Collection Method:  
 GPS unit (Make/Model: Magellan eXplorist GC)  
 Digital Map/Photo,  Topographic Map,  Land Survey  
Est. Accuracy:  < 3 m,  3-5 m,  5-15 m,  > 15 m

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

**4 DEPTH OF WELL** 490' ft.  
WELL'S STATIC WATER LEVEL 387' ft

WELL WAS USED AS:

<input type="checkbox"/> Domestic	<input type="checkbox"/> Public Water Supply	<input type="checkbox"/> Dewatering
<input checked="" type="checkbox"/> Irrigation	<input type="checkbox"/> Oil Field Water Supply	<input type="checkbox"/> Monitoring
<input type="checkbox"/> Feedlot	<input type="checkbox"/> Domestic (Lawn & Garden)	<input type="checkbox"/> Injection Well
<input type="checkbox"/> Industrial	<input type="checkbox"/> Air Conditioning	<input type="checkbox"/> 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 16" in. Was casing pulled? Yes  No  If yes, how much 60"  
Casing height above or below land surface Below 60" in.

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

Grout Plug Intervals: From 10' ft. to 5' ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft., From \_\_\_\_\_ to \_\_\_\_\_ ft.

What is the nearest source of possible contamination:

<input type="checkbox"/> Septic tank	<input type="checkbox"/> Seepage pit	<input type="checkbox"/> Fuel Storage	<input checked="" type="checkbox"/> Other (specify below)
<input type="checkbox"/> Sewer lines	<input type="checkbox"/> Pit privy	<input type="checkbox"/> Fertilizer storage	None Observed
<input type="checkbox"/> Watertight sewer lines	<input type="checkbox"/> Sewage lagoon	<input type="checkbox"/> Insecticide storage	
<input type="checkbox"/> Lateral lines	<input type="checkbox"/> Feedyard	<input type="checkbox"/> Abandoned water well	Direction from well? _____
<input type="checkbox"/> Cess pool	<input type="checkbox"/> Livestock pens	<input type="checkbox"/> Oil well/Gas well	How many feet? _____

FROM	TO	PLUGGING MATERIALS	FROM	TO	PLUGGING MATERIALS
490'	387'	Chlorinated Road Sand	387'	10'	Oversized Rock with Clay Chunks
10'	5'	3,000 PSI CONCRETE	5'	0'	Cut off casing and Backfilled

**7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:** This water well was plugged under my jurisdiction and was completed on (mo/day/year) 9-12-2016 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 145. This Water Well Record was completed on (mo/day/year) 9-15-2016 under the business name of Hydro Resources Mid Continent by (signature) Gary Clepper

**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/index.html>.

Check one:  White Copy  Blue Copy  Pink Copy