CORRECTION(S) TO WATER WELL RECORD (WWC-5)

(to rectify lacking or incorrect information)

Location listed as:	Location changed to:
Section-Township-Range: 15-50N-33W	35-105-25E
Fraction (¼ ¼ ¼): SW SW	N2 N2 SE NW
Other changes: Initial statements:	
Changed to:	
Comments:	
verification method: Map of well locations	from owner, and
verification method: Map of well locations	o topo map.
,	initials: DRL date: 9/15/2005

submitted by: Kansas Geological Survey, Data Resources Library, 1930 Constant Ave., Lawrence, KS 66047-3726 to: Kansas Dept of Health & Environment, Bureau of Water, 1000 SW Jackson, Suite 420, Topeka, KS 66612-1367.



WATER WELL PLUGGING RECORD

Form WWC-5P

KSA 82a-1212

ID NO.____

1	LOCAT	TION OF WA	ATER WELL:		Fraction	Section	Number	Township	Number	Range	Number	
Cou	inty: //	hand	AHO		SW4 SW 14	1	5	50	N	33	B €W	
Dist	County: Wyando He 5V4 5W 14 15 50 N 33 EW Distance and direction from nearest town or city street address of well if located within city?											
2029 Fairfax RCKS 66115												
2	WATE	R WELL OW	NER: CONOC	0/	Phillips Compai	y v	Lac AUE					
2 WATER WELL OWNER: Conoco Phillips Company RR #, St. Address, Box #: 1318 Phillips Bid 420 5 City, State, ZIP Code : Bar Hesuille OK 74064 Board of Agriculture, Division of Water Resources Application Number:												
City, State, ZIP Code : Par /1630 / 12 OK /900 / Application Number:												
3		WELL'S LO	CATION WITH		DEPTH OF WELL							
	AN A	N	N BOX.		WELL'S STATIC WATER LEVEL ft.							
]	WELL WAS USED AS:							
	NV	v——	NE		1 Domestic	5 Public	c Water Supply		9 Dewaterir			
					2 Irrigation3 Feedlot		eld Water Supp estic (Lawn & G		10 Monitoring			
w				E	4 Industrial		onditioning	arderry	12 Other			
					Was a chemical / bacteriolo	gical sample :	submitted to De	enartment? Ye	, N	lo 🗸		
	SW	V	SE		If yes, mo/day/yr sample wa				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
[X				Water Well Disinfected: Ye	es No	o 					
		S										
5	TYPE	OF BLANK	CASING USED	:								
1 Steel 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (Specify below)												
	(3PVC				estos-Cement 8 Concre							
Blank casing diameter												
CROUT RUIC MATERIAL: 1 Next coment (Coment gravity 2 Pentenite 4 Other												
	Grout Plug Intervals: Fromft. toft., Fromft. toft.											
	What is	s the neares	t source of pos	sible	contamination:							
		eptic tank			6 Seepage pit		storage		16 Other (spec	cify below)		
2 Sewer lines 7 Pit privy 3 Watertight sewer lines 8 Sewage lagoon						12 Fertilizer storage 13 Insecticide storage						
4 Lateral lines 9 Feedyard					9 Feedyard 10 Livestock pens		indoned water v well/Gas well	vell				
		·	10		·							
	Directi	on from wei	l?		How many	Teet?						
F	ROM	то	<u> </u>	PLU	JGGING MATERIALS							
2/	19	0	(Deta)	01	ir Grout							
			Cone		9.041							
7	CONT	RACTOR'S	OF LANDON	MNE I	R'S SERZIFICATION: This	water well	was plugged	under mv i	urisdiction ar	nd was com	pleted on	
\vdash	(mo/day/year)											
Water Well Contractor License No												
	by (sig	nature)	DAVII)	<i>if</i>	Humhu"							
	INSTRUCTIONS: Use typewriter or ball point pen. <u>Please press firmly</u> and <u>print</u> 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									ne correct		
ans	SWEIS. SE	and top till	se cobies to k	ails	as Department of Health a	IN EUNIONI	ieiii, buleau C	n water, Ge	ciogy section	1, 1000 500	Jackson	

St., Ste. 420, Topeka, Kansas 66612-1367. Telephone: 785/296-5522. Send one to Water Well Owner and retain one for your records.