## 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 ( 1/4 1/4 1/4):	35-105-25E CNW SENW
Other changes: Initial statements:	
Changed to:	
Comments:	
verification method: Map of use! location=	s from owner, and
verification method: Map of usell locations  North Kansas City 1:24,000	10 topo. map.  initials: DRL date: 9/15/2005
submitted by: Kansas Geological Survey, Data Resources Library, 1930 C	, .

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.

MW 7

WATER WELL PLUGGING RECORD

Form WWC-5P

(SA 82a-1212

ID NO.

1	LOCAT	ION OF WAT	ER WELL:		Fraction	Section Number	Township Numb	er Range Number	
Cou	enty: //	lyand.	atte	,	Set Stelle 14	16	SON	33 EN	
	ance and	direction from	nearest town	or c	ity street address of well if loc	ated within city?			
	200	19 Fai	rfax	R	CKS 66115				
2	WATER	R WELL OWN	IER: Conoc	0	Phillips Compa	y Warler Ave			
	RR #, St	t. Address, Bo	x #: /2/8 : Bac	PA	CKS 66115 Phillips Compa illips Bidg 420 suille OK 7400	Board of Agriculture Application Number	e, Division of Water Res r:	ources	
3			ATION WITH		4 DEPTH OF WELL	26,30 tt			
	AN "X" IN SECTION BOX:			WELL'S STATIC WATE	R LEVEL ft.				
ĺſ		N I			WELL WAS USED AS:				
							0.0	ata da n	
	NN	/	— NE ——	1	1 Domestic 2 Irrigation	<ul><li>5 Public Water Supply</li><li>6 Oil Field Water Supply</li></ul>	oly <u>10 N</u> oni	itoring Well	
w				E	3 Feedlot 4 Industrial	7 Domestic (Lawn & 0 8 Air Conditioning		tion Well	
'				-	4 muusmai	o All Collationing	12 Oute	1	
	sw	ı———	SE	-		gical sample submitted to Das submitted to D		No	
	X				Water Well Disinfected: You	•			
		S		J	water well disinfected: Ye	es No <b>r</b>			
5	TYPE (	OF BLANK C	ASING USED	:					
	1 Stee	el 3 RM	1P (SR) 5	Wro	ought 7 Fibergl	ass 9 Other (Specify t	pelow)		
	<b>2</b> PVC	4 AB	S 6	Ast	estos-Cement 8 Concre	te Tile			
	Blank ( Casing	casing diame height above	tere or below lan	n. d su	Was casing pulled?		If yes, how	/ much	
6	GROU'	T PLUG MAT	ERIAL:	1 Ne	eat cement	ut 3 Bentonite 4	Other		
النا	Grout F	Plug Intervals:	: Fron	n <b>2</b>	6.30 ft. to	, Fromft. t	o ft., From	to ft	
	What is	the nearest	source of pos	sible	contamination:				
1 Septic tank 6 Seepage pit 2 Sewer lines 7 Pit privy					<ul><li>6 Seepage pit</li><li>7 Pit privy</li></ul>	<ul><li>11 Fuel storage</li><li>12 Fertilizer storage</li></ul>		(specify below)	
3 Watertight sewer lines				8 Sewage lagoon	13 Insecticide storage	•			
4 Lateral lines 5 Cess pool				9 Feedyard 10 Livestock pens	<ul><li>14 Abandoned water</li><li>15 Oil well/Gas well</li></ul>	well			
	Directi	on from well?	·		How many	feet?			
	FROM	то	I	DI I	JGGING MATERIALS				
1	191	10		. –					
4	,.30	0	Um	QF	of Grout				
					The state of the s				
7	CONT	<u>i</u> RACTOR'S₄	O# LANDOL	A/N/C	ES CERTIFICATION: This		Lundor my juriodictic	on and was somelated an	
	(mo/da	ıy/year) <b>.//</b>	ノーノン	U	/	and this record is tru	e to the best of my kno	owledge and belief. Kansas	
Water Well Contractor's License No									
by (signature)									
INS	STRUCTI	ONS: Use t	ypewriter or	ball	point pen. <u>Please press fir</u>	mly and print clearly. Plea	ase fill in blanks, unde	erline or circle the correct	
an	swers. Se	end top three	e copies to k	(ans	as Department of Health a	nd Environment, Bureau	of Water, Geology Se	ection, 1000 SW Jackson	
St., Ste. 420, Topeka, Kansas 66612-1367. Telephone: 785/296-5522. Send one to Water Well Owner and retain one for your records.									

