CORRECTION(S) TO WATER WELL RECORD (WWC-5) (to rectify lacking or incorrect information)

Location listed as:	Location changed to:
Section-Township-Range: 22-50N-33W	35-105-25E
Fraction (¼ ¼ ¼):	NE SE SE NW
Other changes: Initial statements:	
Changed to:	
Comments:	
verification method: Map of well location: North Kansas City 1:24,000	s from owner, and topo. map. initials: DRL date: 9/9/2005
	77

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 11

WATER WELL PLUGGING RECORD

Form WWC-5P

KSA 82a-1212

ID NO.____

1	LOCATI	ON OF WAT	ER WELL:		Fraction	Section	Number	Township	Number	Range	Numb	ber
Co	 unty:	lando	Ho		11 ha 11 h 11 h	1	The second	50	r]	3	3	E/ (V
Dis	tance and 6	irection from		n or ci	ty street address of well if loo	ated within cit	y?		· · · · · · · · · · · · · · · · · · ·			
2	WATER	WELL OWN	IER: COPOC	0 /	KS 66/15 Ohillips Grapan Cillips Bidg 42 CSUITE OK 74/0	6 S Ke	reler Au d of Agriculture ication Numbe	OF e, Division of V	Vater Resourc	ces		
3	MARK V	VELL'S LOC	ATION WITH	1	4 DEPTH OF WELL.	W	6 ft.					
		N N		7	WELL'S STATIC WATE	:						
w	NW		NE	- E	1 Domestic 2 Irrigation 3 Feedlot 4 Industrial	6 Oil Fi 7 Dome	Water Supply eld Water Supp estic (Lawn & G onditioning	oly	9 Dewateri 11 Injection 12 Other	ng Well		
	sw sw 		— SE ——— 	_	Was a chemical / bacteriolous figures, mo/day/yr sample www. Water Well Disinfected:	as submitted .			es 1	No		
		S			water wen dismected.	es 140						
5			ASING USED									
	1 Steel 2 VC Blank ca Casing	4 AB	s` 6 ter 2	in.	estos-Cement 7 Fibergi estos-Cement 8 Concre Was casing pulled? face2 9	ete Tile	ther (Specify b			ch	·······	
6	GROUT	PLUG MAT	ERIAL:	1 Ne	at cement ement gro	out 3 Ber	tonite 4 (Other ft				ff
	What is	the nearest	source of pos	ssible	contamination:	_						
Septic tank Sewer lines Watertight sewer lines Lateral lines Cess pool					6 Seepage pit 7 Pit privy 8 Sewage lagoon 9 Feedyard 10 Livestock pens	12 Fert 13 Inse 14 Aba	l storage ilizer storage oticide storage ndoned water well/Gas well	٠.	Other (specify below)			
		•			•	y feet?						
	FROM	ТО		PLU	JGGING MATERIALS							
2	530	0	Clare	211	Geont							
7	(mo/day Water W	ell Contracto	≠ License No		R'S CERTIFICATION: Thi	and th	s record is tru This Wa	e to the best ater Well Rec	of my knowle ord was comp	edge and belicated on (mo	ef. Kar /day/y	nsas (ear)
					point pen. <u>Please press fir</u> as Department of Health a							

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

