

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

County: Wyandotte

Location listed as:

Location changed to:

Section-Township-Range: 26-205-25E

26-105-25E

Fraction (  $\frac{1}{4}$   $\frac{1}{4}$   $\frac{1}{4}$ ): NW SW SW

NW SW SW

Other changes: Initial statements: \_\_\_\_\_

Changed to: \_\_\_\_\_

Comments: \_\_\_\_\_

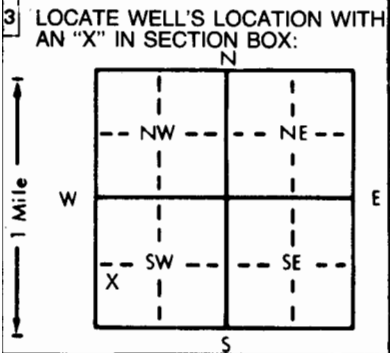
verification method: Written & legal descriptions, position on plat map,  
well owner, & North Kansas City 1:24,000 topo. map.

initials: DRB date: 10/7/2005

1 LOCATION OF WATER WELL: County: **Wyandotte** Fraction: **NW 1/4 SW 1/4 SW 1/4** Section Number: **26** Township Number: **T 20 S** Range Number: **R 25 EW**

Distance and direction from nearest town or city street address of well if located within city?  
**1657' S and 60' E of NW Corner SW 1/4 Sec 26, T26S, R25 East**

2 WATER WELL OWNER: **Port Authority** Board of Agriculture, Division of Water Resources  
 RR#, St. Address, Box #: **Kansas City, Kansas** Application Number:  
 City, State, ZIP Code:



4 DEPTH OF COMPLETED WELL: **79** ft. ELEVATION: **663.5**  
 Depth(s) Groundwater Encountered 1. **17** ft. 2. ft. 3. ft.  
 WELL'S STATIC WATER LEVEL: **17.0** ft. below land surface measured on mo/day/yr **2-18-85**  
 Pump test data: Well water was ft. after hours pumping gpm  
 Est. Yield gpm: Well water was ft. after hours pumping gpm  
 Bore Hole Diameter: **6 1/2** in. to **7.9** ft., and in. to ft.  
 WELL WATER TO BE USED AS:  
 5 Public water supply 8 Air conditioning 11 Injection well  
 1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)  
 2 Irrigation 4 Industrial 7 Lawn and garden only **10 Observation well**  
 Was a chemical/bacteriological sample submitted to Department? Yes... No... **X**...; If yes, mo/day/yr sample was submitted  
 Water Well Disinfected? Yes No **X**

5 TYPE OF BLANK CASING USED:  
 1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued Clamped  
 2 **PVC** 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded  
 7 Fiberglass **Threaded**  
 Blank casing diameter **2** in. to **39** ft., Dia in. to ft., Dia in. to ft.  
 Casing height above land surface: **1.5** in., weight lbs./ft. Wall thickness or gauge No. **sch 40**  
 TYPE OF SCREEN OR PERFORATION MATERIAL:  
 1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 10 Asbestos-cement  
 2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 11 Other (specify)  
 12 None used (open hole)  
 SCREEN OR PERFORATION OPENINGS ARE:  
 1 **Continuous slot** 3 Mill slot 5 Gauzed wrapped 8 Saw cut 11 None (open hole)  
 2 Louvered shutter 4 Key punched 6 Wire wrapped 9 Drilled holes  
 7 Torch cut 10 Other (specify)  
 SCREEN-PERFORATED INTERVALS: From **39** ft. to **49** ft., From ft. to ft.  
 From **59** ft. to **79** ft., From ft. to ft.  
 GRAVEL PACK INTERVALS: From **NA** ft. to ft., From ft. to ft.  
 From ft. to ft., From ft. to ft.

6 GROUT MATERIAL: 1 **Neat cement** 2 Cement grout 3 **Bentonite** 4 Other  
 Grout Intervals: From **4** ft. to **8** ft., From **8** ft. to **10** ft., From ft. to ft.  
 What is the nearest source of possible contamination:  
 1 Septic tank 4 Lateral lines 7 Pit privy 10 Livestock pens 14 Abandoned water well  
 2 **Sewer lines** 5 Cess pool 8 Sewage lagoon 11 Fuel storage 15 Oil well/Gas well  
 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer storage 16 Other (specify below)  
 13 Insecticide storage

Direction from well? How many feet?

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	3.8	2 Silt			
3.8	79	05 Sand			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) **2-15-85** and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **A116** This Water Well Record was completed on (mo/day/yr) **3-16-85** under the business name of **TENACON CONSULTANTS INC** by (signature) *[Signature]*

INSTRUCTIONS: Use typewriter or ball point 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, Division of Environment, Environmental Geology Section, Topeka, KS 66620. Send one to WATER WELL OWNER and retain one for your records.

OFFICE USE ONLY  
T 20  
R 25  
EW  
26  
NW 1/4  
SW 1/4  
SW 1/4