CORRECTION(S) TO WATER WEL	,				
(to rectify lacking or incorrec	(to rectify lacking or incorrect information)				
	County: Wyandotte				
ocation listed as:	Location changed to:				
Section-Township-Range: None Given	34-105-25				

Fraction ( 1/4	1/4 1/4):	NE NE SW
Other changes:	Initial statements: Fair fax County	/
Changed to:	Myandotte County	

Comments: verification method: Latitude & longitude, well owner's address,
and North Kansas City 1:24,000 topo. map.

initials: DRL date: 12/1/2006

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.

	R WELI				Form	WWC-5	;	Divisio	n of Wate	r Resources; App. No.	
	CATION C nty: \tau		TER WELL:		Fraction 1/4	1/4	1/4	Section N	lumber	Township Number T S	Range Number R E/W
Diete	noo and di	raction	from noorest toxx	ı or ci	ty street addr	ess of well	l if G	lobal Pos	sitioning	Systems (decimal deg	rees, min. of 4 digits)
located within city? Survivo W of Kareas City W Latitude: 39.13669 W Longitude: 44.61133 W											
2 WA	TER WEI	LL OW	NER: Wooel			3 Ci411		Elevation		II CDIIW	
KK#	, St. Adare	ess, Box	# :4018 I	7000	an Por	ad of	- · ~ · 1	Datum:			
	, State, ZII		Kans	<u> </u>	zan loc	<u> 15 ا مامآ</u>		Data Col			
I	CATE WE	LL'S	4 DEPTH OF C	COMI	PLETED W	ELL	·53··	•••••	ft.		
1	CATION 'H AN "X'	, IN	Denth(s) Ground	water	Encountered	(1) . <b>(</b>	30	ft	(2)	ft (3)	ft
I	TH AN "X" IN CTION BOX:  Depth(s) Groundwater Encountered (1) 60										
	N Pump test data: Well water wasft. afterhours pumpinggpm  Est. Yieldgpm: Well water wasft. afterhours pumpinggpm									gpm	
			Est. Yield WELL WATER	gpn	1: Well wate	er was		ft. after		hours pumping conditioning 11 Inj	
w   NV	W   NE	<sub>E</sub>		Fee						vatering 12 Ot	
"   -		ا ٔ ا			ustrial 7	Domestic	(lawn &	garden	10 Mon	itoring well)MW-2	.lQ
SV	V   SE		W/	4	:-1:-1	11	44 - 14 - F		40 37	Y	IC (1/
	1									No <b>\(\Lambda\)</b> ; Yes No	
	S		Sample was such	intica	• • • • • • • • • • • • • • • • • • • •	•••••	w atcı	well dish	incercu:	105	
5 TYPI	E OF CAS	ING U	SED: 5 Wro	ought	Iron	8 Concre	ete tile		CASINO	G JOINTS: Glued	Clamped
1	Steel	3 RMP	(SR) 6 Asb	estos-	-Cement	9 Other (	specify	below)		Welded	······································
		4 ABS								Threaded	
Casing l	asing diam height abov	eter ze land s	surface.	.د.	π., Diam in Weig	eter ht	1r 1	1. to bs/ft	π., Wall thi	Diameter	<b>Зът</b> 40
			ERFORATION N					105.711.	wan tiii	eniess of gaage 110.	~~
l .	Steel				glass 7		9 A		_	11 Other (Specify)	
	Brass N OR PER		ranized Steal 6 FION OPENINGS			RM (SR)	10 A	sbestos-C	Cement	12 None used (open	hole)
						ed 7 Tor	ch cut	9 Drille	ed holes	_11 None (open ho	ole)
2	Louvered s	shutter	4 Key punched	6 W	ire wrapped	8 Sa	w Cut	10 Othe	er (specif	y) HOLON (open ho to to t	in cut
SCREE	N-PERFOI	RATED	INTERVALS: I	From.	CH.	ft. to		<b>D</b> ft.,	From	ff. to	ft.
	GRAVEL	PACK	INTERVALS:	From.	40	ft. to 5	3	ft., ft	From	ft. to ft. to	ft.
			Seas <-	From.	36	ft. to	<i>D</i>	ft.,	From	ft. to	ft.
6 GRO	HT MATI	ERIAL	1 Neat cemen	f 2	Cement grou	t 3 Rent	onite	4 Other			
Grout In										t., From	
		source	of possible conta	minat	ion:					_	
	Septic tank Sewer line		4 Lateral l		7 Pit privy 8 Sewage lag		Livesto Fuel sto			secticide Storage candoned water well	16 Other specify
	Watertight				9 Feedyard			_		l well/gas well	Off Sittle
								feet?			antaminate.
FROM	TO		LITHOL		LOG		FROM	TO		PLUGGING INT	ERVALS
52	57		ari zan		4000						
·JL	35	<del></del>	ellan 50	IU.	otone						
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) 1											
Under m	y jurisdicti Water Wei	on and	was completed or actor's License No		gay/year) 10	is Water W	and Vell Rec	tnis record	a is true t ompleted	o the best of my know on (mo/day/year)	viegge and belief.
			f Accuration		e milli			ord was co signatu)	-	on (mo/day/year) . 1.1	,
INSTRUC	CTIONS: Us	se typewr	iter or ball point pen.	PLEA	SE PRESS FIRE	MLY and PR	INT clearly	y. Please fi	ll in blanks	s, underline or circle the co	
three copic 785-296-5										Suite 420, Topeka, Kansas 00 for each <u>constructed</u>	
http://www.kdhe.state.ks.us/geo/waterwells.											