

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

(to rectify lacking or incorrect information)

County: Wyandotte

Location listed as:

Section-Township-Range: 34-10S-25E

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

Location changed to:

34-10S-25E

SW NE SE

Other changes: Initial statements: _____

Changed to: _____

Comments: _____

verification method: Legal description, position on plat map,
and North Kansas City 1:24,000 topo. map.

initials: DRK date: 1/28/2005

1 LOCATION OF WATER WELL: County: <u>Wyandotte</u>	Fraction <u>SE 1/4 NE 1/4 SW 1/4</u>	Section Number <u>34</u>	Township Number <u>T10S</u>	Range Number <u>R250E</u>
--------------------------------------------------------------	--------------------------------------	--------------------------	-----------------------------	---------------------------

Distance and direction from nearest town or city street address of well if located within city?

Fairfax

2 WATER WELL OWNER: <u>Conoco Phillips</u> RR#, St. Address, Box #: <u>2029 Fairfax Trafficway</u> City, State ZIP Code: <u>KCKS 66115</u>	Global Positioning Systems (decimal degrees, min. of 4 digits) Latitude: _____ Longitude: _____ Elevation: _____ Datum: _____ Data Collection Method: _____
---------------------------------------------------------------------------------------------------------------------------------------------------------	-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:

N			
	NW		NE
W			
	SW		SE X
S			

4 DEPTH OF WELL 25.75 ft.

WELL'S STATIC WATER LEVEL 20.68 ft MW 36C

WELL WAS USED AS:

1 Domestic	5 Public Water Supply	9 Dewatering
2 Irrigation	6 Oil Field Water Supply	<input checked="" type="checkbox"/> 10 Monitoring
3 Feedlot	7 Domestic (Lawn & Garden)	<input type="checkbox"/> 11 Injection Well
4 Industrial	8 Air Conditioning	12 Other _____

Was a chemical/bacteriological sample submitted to Department? Yes _____ No

5 TYPE OF BLANK CASING USED:

<input checked="" type="checkbox"/> 1 Steel	<input type="checkbox"/> 3 RMP (SR)	<input type="checkbox"/> 5 Wrought	<input type="checkbox"/> 7 Fiberglass	<input type="checkbox"/> 9 Other (Specify below)
<input checked="" type="checkbox"/> 2 PVC	<input type="checkbox"/> 4 ABS	<input type="checkbox"/> 6 Asbestos-Cement	<input type="checkbox"/> 8 Concrete Tile	_____

Blank casing diameter 2 in. Was casing pulled? Yes No _____ If yes, how much 8

Casing height above or below land surface 24 in.

6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other _____

Grout Plug Intervals: From 25.75 ft. to 1 ft., From _____ ft. to _____ ft., From _____ to _____ ft.

What is the nearest source of possible contamination:

<input type="checkbox"/> 1 Septic tank	<input type="checkbox"/> 6 Seepage pit	<input checked="" type="checkbox"/> 10 Fuel Storage	<input type="checkbox"/> 16 Other (specify below)
<input type="checkbox"/> 2 Sewer lines	<input type="checkbox"/> 7 Pit privy	<input type="checkbox"/> 12 Fertilizer storage	_____
<input type="checkbox"/> 3 Watertight sewer lines	<input type="checkbox"/> 8 Sewage lagoon	<input type="checkbox"/> 13 Insecticide storage	_____
<input type="checkbox"/> 4 Lateral lines	<input type="checkbox"/> 9 Feedyard	<input type="checkbox"/> 14 Abandoned water well	Direction from well? _____
<input type="checkbox"/> 5 Cess pool	<input type="checkbox"/> 10 Livestock pens	<input type="checkbox"/> 15 Oil well/Gas well	How many feet? _____

FROM	TO	PLUGGING MATERIALS	FROM	TO	PLUGGING MATERIALS
<u>25.75</u>	<u>1</u>	<u>Bentonite chips</u>			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 9/26/07 and this record is true to the best of my knowledge and belief, Kansas Water Well Contractor's License No. 304. This Water Well Record was completed on (mo/day/year) 11-18-07 under the business name of MAXS by (signature) Daniel Humpf

INSTRUCTIONS: Use typewriter or ballpoint 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, Bureau of Water, Geology Section, 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. Visit us at <http://www.kdheks.gov/geo/waterwells>.