County: Shawnee Fraction NE SE SE SE	Sec. 26 T // S R /5 DW						
CORRECTION(S) TO WATER WELL COMPLETION RECORD (WWC-5)							
(to rectify lacking or incorrect in Owner: Terracon Consultants, Inc.	nformation)						
Location was listed as:	Location changed to:						
Section-Township-Range: 26-115-15E	26-115-15E						
Fraction (4 4 4): None Given	NE SE SE SE						
Other changes: Initial statements:							
Changed to:							
Comments:							
Verification method: Latitude & Longitude, K	GS"LEO" conversion tool						
written description, city street m	ap and mapping tool on						
KGS website.	initials: DRL date: 6/12/2014						
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.							

WATER WELL PLUGGING RECORD Form WWC-5P KSA 82a-1212 ID NO.							
1	LOCATION OF WATER W		Section Number	Township Number	Range Number		
	County: Shawnee	and the second s	1/4 26	T 11 S	15 P E W		
		ocation; if unknown, distance & intersection: If at owner's address,	Global Positioning Systems (GPS) information: Latitude: 39.060034 (in decimal degrees)				
	check here	intersection. If at owner's address,	Longitude:95.7064	184	(in decimal degrees)		
		Elevation:					
NW of SW 6th Avenue and SW MacVicar Avenue			Datum: WGS84, NAD83, NAD27 Collection Method:				
•	WATER WELL OWNER:	GPS unit (Make/Model:					
2	RR#, St. Address, Box #:	3113 SW Van Buren Street	Digital Map/Photo, Topographic Map, Land Survey				
ar ar arm a r		Topeka, Kansas 66611			m, \square 3-5 m, \square 5-15 m, \square > 15 m		
Est. Accuracy: Li < 3 m, Li 3-3 m, Li 3-13 m, L							
3							
	WITH AN "X" IN SECTION BOX:	WELL'S STATIC WA	TER LEVEL 9.12 ft				
	N	WELL WAS USED A					
	NIX			. п.			
	NW NE	Domestic Irrigation	Public Water Suppl Oil Field Water Sup				
W	7	E Feedlot	Domestic (Lawn &	11 /	ion Well		
	SW SE	Industrial L	☐ Air Conditioning		B-20		
	1 1 1	Was a shaminal/hastar	iological sample submit	ttad to Donartmant? V	'es D No D		
	X	was a chemical/bacter	iological sample submit	ned to Department: 1	es NO NO		
5	TYPE OF BLANK CASIN	NG USED:					
	rang rang	. – . –	—				
	Steel RMP (SR		Fiberglass [] Concrete Tile	Other (Specify below)			
	MITTER LABS	Asbestos-Cement L	oncrete The				
	Blank casing diameter 2	in. Was casing pulled? Yes	No If yes, ho	w much 4 ft			
	Casing height above or belo	ow and surface 48 in.					
6	GROUT PLUG MATERIA	AL: Neat cement Cem	ent grout 🔟 Bentor	nite U Other			
	Grout Plug Intervals: Fro	$ \operatorname{rom} \frac{0}{1} \text{ft.} \operatorname{to} \frac{15}{1} \text{ft.}, F $	rom ft. to _	it., From_	to It.		
	What is the nearest source of	of possible contamination:					
	Septic tank	Seepage pit Fuel		Other (specify below)			
	Sewer lines		izer storage				
	Watertight sewer lines Lateral lines		ticide storage doned water well Dir	rection from well?			
	Cess pool	L L		w many feet?			
	FROM TO	PLUGGING MATERIALS	FROM TO	PLUGGING	MATERIALS		
	0 15 bent	ntonite chips					
	TO COMPRESE OF A ANDOMANDAG CERTIFICATION OF THE STATE OF						
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 5/1/2014 and this record is true to the best of my knowledge and belief. Kansas Water							
Well Contractor's License No. 416 This Water Well Record was completed on mo/day/year 15/5/2014 under the							
business name of Terracon Consultants, Inc. by (signature)							
INSTRUCTIONS: Use typewriter or ballpoint pen. Please press firmly and print clearly. Please fill in blanks, underline or circle the							
		by to Kansas Department of Health					
Jac	Jackson St., Ste. 420, Topeka, Kansas 66612-1367. Telephone: 785/296-5524. Send one to Water Well Owner and retain one for your						
records. Visit us at http://www.kdheks.gov/waterwell/index.html.							