

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

(to rectify lacking or incorrect information)

County: Shawnee

Location listed as:

Section-Township-Range: 7-11 S-16 E

Fraction ($\frac{1}{4}$ $\frac{1}{4}$ $\frac{1}{4}$): None Given

Location changed to:

7-11 S-16 E

SE SE SW

Other changes: Initial statements: _____

Changed to: _____

Comments: _____

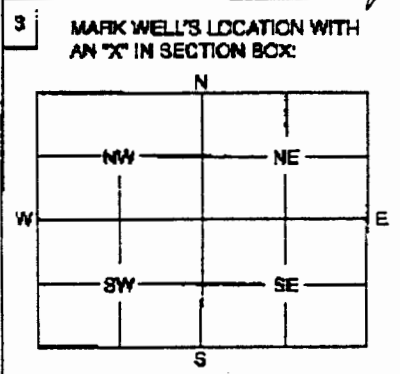
verification method: Legal description, well owner's address, city street map, and mapping tool on KGS website.

initials: DRB date: 4/29/2008

1 LOCATION OF WATER WELL: Fraction Section Number Township Number Range Number
 County: Shawnee $\frac{1}{4}$ $\frac{1}{4}$ $\frac{1}{4}$ 07 11S 16 EW

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

2 WATER WELL OWNER: Rochester Cemetery
 RR #, St. Address, Box #: 1225 NW 35th St. Board of Agriculture, Division of Water Resources
 City, State, ZIP Code: Topeka, KS 66618 Application Number:



4 DEPTH OF WELL 52 ft.
 WELL'S STATIC WATER LEVEL 37 ft.
 WELL WAS USED AS:
 1 Domestic 5 Public Water Supply 9 Dewatering
 2 Irrigation 6 Oil Field Water Supply 10 Monitoring Well
 3 Feedlot 7 Domestic (Lawn & Garden) 11 Injection Well Abandoned
 4 Industrial 8 Air Conditioning 12 Other

Was a chemical / bacteriological sample submitted to Department? Yes No No
 If yes, mo/day/yr sample was submitted _____
 Water Well Disinfected: Yes No

5 TYPE OF BLANK CASING USED:
 1 Steel 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (Specify below) Rock lined
 2 PVC 4 ABS 6 Asbestos-Cement 8 Concrete Tile

Blank casing diameter 36 in. Was casing pulled? Yes No
 Casing height above or below land surface _____ in. If yes, how much _____ in.

6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout Bentonite 4 Other
 Grout Plug Intervals: From 5 ft. to 4'6" ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.

What is the nearest source of possible contamination:
 1 Septic tank 8 Seepage pit 11 Fuel storage 16 Other (specify below)
 2 Sewer lines 7 PR privy 12 Fertilizer storage
 3 Watertight sewer lines 8 Sewage lagoon 13 Insecticide storage
 4 Lateral lines 9 Feedyard 14 Abandoned water well
 5 Cess pool 10 Livestock pens 15 Oil well/Gas well

Direction from well? _____ How many feet? _____

FROM	TO	PLUGGING MATERIALS
<u>52</u>	<u>15</u>	<u>Sand</u>
<u>15</u>	<u>5</u>	<u>clay</u>
<u>5</u>	<u>4.5</u>	<u>Bentonite</u>
<u>4.5</u>	<u>0</u>	<u>TOPSOIL</u>

7 CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 1-2-08 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. _____ This Water Well Record was completed on (mo/day/year) _____ under the business name of Dick Well Septic by (signature) A. Kim Weaver

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, Bureau of Water, Geology Section, 1000 SW Jackson St., Sta. 420, Topeka, Kansas 66612-1367. Telephone: 785/296-5522. Send one to Water Well Owner and retain one for your records.