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

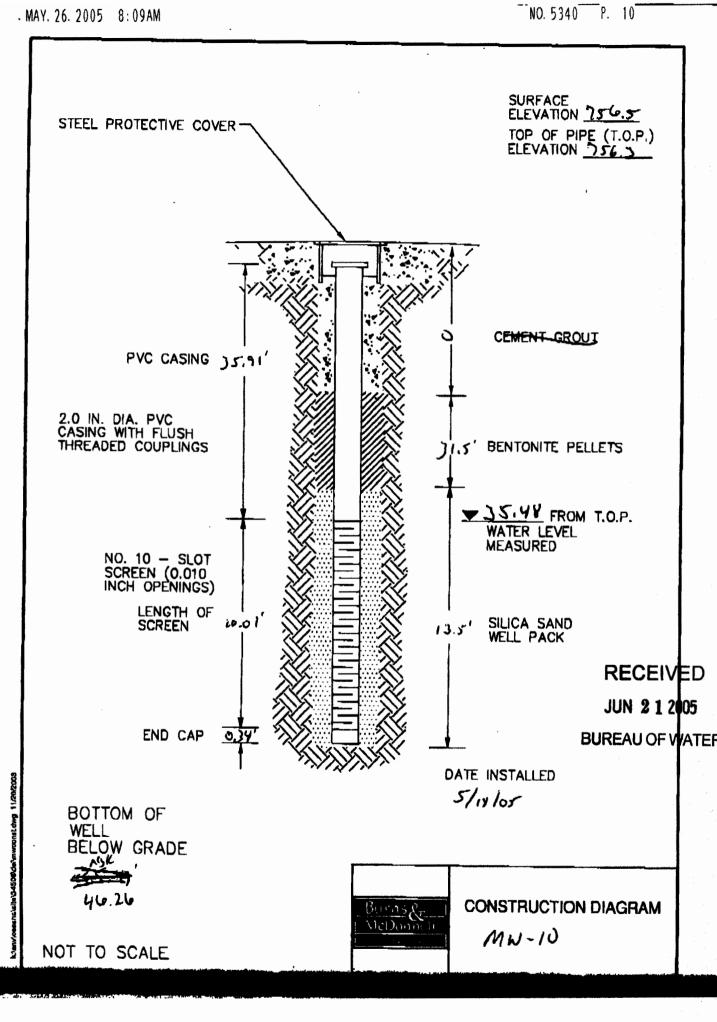
(to rectify lacking or incorrect information)

Location listed as:	County: Wyandotte Location changed to:
Section-Township-Range: None Given	21-115-25E
Fraction (1/4 1/4 1/4):	NW NW NW
Other changes: Initial statements:	
Changed to:	
Comments:	
verification method: Well owner's address, Shawnee 1:24,000 topo. ma	city street map, and
-rawnee 1.27,000 topo. ma	initials: 6) R. date: 7/1/2005

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 RECORD Form WWC-5 KSA 82a-1212 ID No. 1110						
LOCATION OF WATER WELL: Fraction Section Number Township Number	Range Number					
County: 1/4 1/4 1/4 1/4 1/4 1/5 Distance and direction from nearest town or city street address of well if located within city?	R	E/W				
Distance and direction from hearest town or city street address of well it located within city?						
2 WATER WELL OWNER: THE PQ COSPORATION RR#, St. Address, Box # : 1700 Kansas Ave. City, State, ZIP Code : Kansas City, K5 Board of Agriculture, D Application Number:	ivision of Water	r Resources				
3 LOCATE WELL'S LOCATION WITH 4 DEPTH OF COMPLETED WELL						
AN "X" IN SECTION BOX: Depth(s) Groundwater Encountered 1		ft.				
Pump test data: Well water was	umping umpingi jection well ther (Specify be	gpm gpm elow)				
Was a chemical/bacteriological sample submitted to Department? Yes No; If yes, m mitted water Well Disinfected? Yes						
2 PVC 4 ABS 7 Fiberglass	ed nded)					
Blank casing diameter						
1 Steel 3 Stainless Steel 5 Fiberglass 8 RMP (SR) 11 Other (Specify)	10 Asbestos-Cement 11 Other (Specify)					
	,	n holo)				
1 Continuous slot 3 Mill slot 6 Wire wrapped 9 Drilled holes 2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify)		ft.				
SCREEN-PERFORATED INTERVALS: From		ft.				
From		ft.				
GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other						
Grout Intervals: From ft. to ft., From ft. to ft., From						
	oandoned wate					
	15 Oil well/Gas well 16 Other (specify below)					
3 Watertight sewer lines 6 Seepage pit 9 Feedyard 13 Insecticide storage	orage					
Direction from well? How many feet?	· · · · · · · · · · · · · · · · · · ·					
FROM TO LITHOLOGIC LOG FROM TO PLUGGING IN	TERVALS					
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CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged und completed on (mo/day/year)						

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 decies to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well.



Drilling Log

Project		,	•	Project Num	ber			_		Boring Number			
	Elevation		Location	pation			<u> </u>			Page			
Air Monitoring Equipment							Total Footage						
LEL/O-										Uk.			
C	rilling Type	Hole Size	•	Overbürden	Footage	+	Bedrock	r Footag	8	No. of Samples No. of Core Box		lo. of Core Boxes	
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Drilling Log Continuation

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Drilling Log Continuation

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97-Pma	thing Zone BH=Bore Hole S=Sample						05180	1 Form WCD-KC-2-2

BZ=Breathing Zone

8H=Bore Hole

S=Sample

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