

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

(to rectify lacking or incorrect information)

County: Wyandotte

Location listed as:

Location changed to:

Section-Township-Range: 10-50N-25E

10-11S-25E

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

SE SE SW

Other changes: Initial statements: \_\_\_\_\_

Changed to: \_\_\_\_\_

Comments: \_\_\_\_\_

verification method: Written & legal descriptions, position on plat  
map, and Kansas City 1:24,000 topo. map.

initials: WRL date: 10/6/2005

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.

1 LOCATION OF WATER WELL:		Fraction		Section Number		Township Number		Range Number	
County: WYANDOTE		SE 1/4 SE 1/4 SW 1/4		10		T 50 N		R 25 E	
Distance and direction from nearest town or city street address of well if located within city?									
NO ADDRESS - LOCATED NEAR LEVEE NEAR FAIRFAX AIRPORT (KANSAS CITY, KS)									
2 WATER WELL OWNER: FAIRFAX LEVEE DISTRICT 90 S.B. & B.									
RR#, St. Address, Box #: TOWER II, GATEWAY CENTER, SUITE 900									
City, State, ZIP Code: KANSAS CITY, KS. 66101									
Board of Agriculture, Division of Water Resources									
Application Number:									
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: 34 ft. ELEVATION: 740							
		Depth(s) Groundwater Encountered 1. 12.5 ft. 2. ft. 3. ft.							
		WELL'S STATIC WATER LEVEL 12.5 ft. below land surface measured on mo/day/yr 4-30-87							
		Pump test data: Well water was ft. after hours pumping gpm							
		Est. Yield gpm: Well water was ft. after hours pumping gpm							
		Bore Hole Diameter 4 3/4 in. to 34 ft. and in. to ft.							
		WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well							
		1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)							
		2 Irrigation 4 Industrial 7 Lawn and garden only 10 Observation well							
		Was a chemical/bacteriological sample submitted to Department? Yes No X; If yes, mo/day/yr sample was submitted							
		Water Well Disinfected? Yes No X							
5 TYPE OF BLANK CASING USED:									
1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued Clamped									
2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded									
7 Fiberglass Threaded X									
Blank casing diameter 2 in. to 23.5 ft. Dia 5 in. to ft. Dia in. to ft.									
Casing height above land surface 18 in. weight 50M 40 lbs./ft. Wall thickness or gauge No.									
TYPE OF SCREEN OR PERFORATION MATERIAL:									
1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 10 Asbestos-cement									
2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 11 Other (specify)									
12 None used (open hole)									
SCREEN OR PERFORATION OPENINGS ARE:									
1 Continuous slot 5 Gauzed wrapped 8 Saw cut 11 None (open hole)									
2 Louvered shutter 3 Mill slot 6 Wire wrapped 9 Drilled holes									
4 Key punched 7 Torch cut 10 Other (specify)									
SCREEN-PERFORATED INTERVALS: From ft. to ft. From ft. to ft. From ft. to ft.									
GRAVEL PACK INTERVALS: From 23.5 ft. to 34.2 ft. From ft. to ft. From ft. to ft.									
6 GROUT MATERIAL: Neat cement 2 Cement grout 3 Bentonite 4 Other									
Grout Intervals: From 0 ft. to 8.5 ft. From 6.5 ft. to 10.5 ft. From ft. to ft.									
What is the nearest source of possible contamination:									
1 Septic tank 4 Lateral lines 7 Pit privy 10 Livestock pens 14 Abandoned water well									
2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 15 Oil well/Gas well									
3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer storage 16 Other (specify below)									
13 Insecticide storage NONE									
Direction from well? How many feet?									
FROM TO LITHOLOGIC LOG FROM TO LITHOLOGIC LOG									
0 8.5 BROWN, FINE GRAINED SILTY SAND									
8.5 12.5 GRAY SANDY SILT									
12.5 34.0 GRAY SILTY SAND									
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) 4-30-87 and this record is true to the best of my knowledge and belief. Kansas									
Water Well Contractor's License No. 399 This Water Well Record was completed on (mo/day/yr) 12-13-87									
under the business name of HOWARD-CLYDE CONSULTANTS by (signature) Richard L. Mohr									
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 Protection, Topeka, Kansas 66620-7320, Telephone: 913-862-9360. Send one to WATER WELL OWNER and retain one for your records.									