

County: Wyandotte Fraction: SE SE NW NW Sec. 21 T. 11 S R. 25 E

CORRECTION(S) to WATER WELL COMPLETION RECORD Form WWC-5 (to rectify lacking or incorrect information)

Owner: Colgate-Palmolive MW 24

If location corrected, was listed as:

Section-Township-Range: _____

Location changed to:

Fraction (1/4 calls): NW NW NW

SE SE NW NW

Other changes: Initial statements: Latitude and Longitude taken from plugging record

Changed to: Latitude 39.084558 Longitude -94.645584

Comments: _____

Verification method: Verified with LEOWEB and KGS mapper

Initials: SH Date: 04-15-2019

Submitted by: ☒ Kansas Geological Survey, Data Resources Library, 1930 Constant Ave., Lawrence, KS 66047-3724
☐ 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: <u>Wyandotte</u>		<u>NW 1/4 NW 1/4 NW 1/4</u>	<u>21</u>	T <u>11</u> S	R <u>25</u> EW
Distance and direction from nearest town or city street address of well if located within city? <u>Approx. 200' north</u>					
2 WATER WELL OWNER: <u>Colgate - Palmolive</u>					
RR#, St. Address, Box # : <u>1806 Kansas Ave</u>				Board of Agriculture, Division of Water Resources	
City, State, ZIP Code : <u>Kansas City, KS</u>				Application Number:	
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL <u>45'</u> ft. ELEVATION: _____			
<div style="text-align: center;">N X NW NE SW SE S</div>		Depth(s) Groundwater Encountered 1 <u>36</u> ft. 2 _____ ft. 3 _____ ft.			
		WELL'S STATIC WATER LEVEL <u>35.04</u> ft. below land surface measured on mo/day/yr <u>11/30/05</u>			
		Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm			
		Est. Yield _____ gpm: Well water was _____ ft. after _____ hours pumping _____ gpm			
		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 Domestic (lawn & garden) <u>10 Monitoring well</u>			
Was a chemical/bacteriological sample submitted to Department? Yes <u>No</u> ; 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 iron	8 Concrete tile	CASING JOINTS: Glued _____ Clamped _____
<u>2 PVC</u>		4 ABS	6 Asbestos-Cement	9 Other (specify below)	Welded _____
			7 Fiberglass		Threaded _____
Blank casing diameter _____ in. to _____ ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.					
Casing height above land surface <u>0</u> in., weight _____ lbs./ft. Wall thickness or gauge No. <u>sch 40</u>					
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		<u>3 Mill slot</u>	5 Gauzed wrapped	8 Saw cut	11 None (open hole)
2 Louvered shutter		4 Key punched	6 Wire wrapped	9 Drilled holes	
			7 Torch cut	10 Other (specify) _____	ft.
SCREEN-PERFORATED INTERVALS: From <u>45</u> ft. to <u>25</u> ft., From _____ ft. to _____ ft.					
GRAVEL PACK INTERVALS: From <u>45</u> ft. to <u>21.5</u> ft., From _____ ft. to _____ ft.					
6 GROUT MATERIAL: 1 Neat cement 2 <u>Cement grout</u> 3 Bentonite 4 Other <u>Bentonite chips 21.5-17.5'</u>					
Grout Intervals: From <u>17.5</u> ft. to <u>3</u> ft., From _____ ft. to _____ 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	
Direction from well? _____ How many feet? _____					
FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	10	Clay, dark gray to gray brown			
10	22	Sand, fine, gray brown			
22	22.5	Sandy clay, gray brown			
39	45	Sand, fine to medium, yellow brown			
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) <u>11/05</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's Licence No. <u>524</u> This Water Well Record was completed on (mo/day/yr) _____ under the business name of <u>COSETECHNICAL INC.</u> by (signature) <u>[Signature]</u>					
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., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5622. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well.					