County:	Wyandotte	Fraction:	SW SE NW I		Sec	21	T	11S	R	25	- 	
CORRECT	TION(S) to WATER WE	LL COMPLE	TION RECORD	Forn	n WWC	-5 (to	rectify lac	king or	incorre	ct infor	mation)	
Owner: Co	olgate-Palmolive									OBS	07-4	
If location corrected, was listed as:					Location changed to:							
Section-Township-Range:												
Fraction (1/4 calls):NW NW NW					SW SE NW NW							
Other changes: Initial statements: Latitude and Longitude taken from plugging record												
Changed to:	Latitude 39.0846	33 Longitud	e -94.646223								·	
Comments:							·					
Verification	method: Verified wi	th LEOWEE	and KGS ma	pper								

]	Initials:	SH	Date:	04-1	5-20°	19	
Submitted by	y: Kansas Geological											
	Kansas Dept. of H	ealth & Enviror	nment, Bureau of W	ater, 1	.000 SW	Jacksor	ı, Suite 42	0, Tope	ka, KS	66612-	1367	

(rev 01/26/2018)

County: Wygn of the NW1/4 NW 1/4 NW 1/4 Distance and direction from nearest town or city street address of well if located within city? 2 WATER WELL OWNER: Colgate Palmolive Company RR#, St. Address, Box #: 1806 Kansqs Ave Board of Agriculture, Division of Ware Application Number: 3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: N Depth(s) Groundwater Encountered 1 ft. 2 ft. 3 mount of the second surface measured on mo/day/yr mount o	Number EW
Distance and direction from nearest town or city street address of well if located within city? 2 WATER WELL OWNER: Colgate Palmolive Company RR#, St. Address, Box # : 1806 Kansq s Ave Board of Agriculture, Division of Water Application Number: 3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: N Depth(s) Groundwater Encountered 1 ft. 2 ft. 3 below land surface measured on mo/day/yr Well's STATIC WATER LEVEL ft. after hours pumping ft. after hours pum	
WATER WELL OWNER: Colquite Palmolive Company RR#, St. Address, Box # : 1806 Kansq s Ave Board of Agriculture, Division of Water Application Number: City, State, ZIP Code	ter Resourc
Board of Agriculture, Division of Ward State, ZIP Code : Kansus City Kstate, ZIP Code : Kansu	ter Resourc
Board of Agriculture, Division of War Application Number: State	ter Resourc
Application Number: Application Number: Application Number:	
AN "X" IN SECTION BOX: Depth(s) Groundwater Encountered 1	
AN "X" IN SECTION BOX: N Depth(s) Groundwater Encountered 1	
WELL'S STATIC WATER LEVELft. below land surface measured on mo/day/yrhours pumping Pump test data: Well water wasft. afterhours pumping Est. Yield	4
Pump test data: Well water was	II.
Est. Yield gpm: Well water wasft. after	ar
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	gr
w/ 2 Irrigation 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well 1	below)
W E 2 Irrigation 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring Well	
- SW SE Was a chemical/bacteriological sample submitted to Department? Yes No; If yes, mo/day/yrs sa	mple was sı
mitted Water Well Disinfected? Yes	No
S CARROLIONES Charles Charles	maad
5 TYPE OF BLANK CASING USED: 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued	•
1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded	
Blank casing diameter	
Casing height above land surface	
	_
TYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel 3 Stainless Steel 5 Fiberglass 8 RMP (SR) 11 Other (Specify)	$\stackrel{\smile}{\sim}$
0.400 Managed (annual	
2 biass	
SCREEN OR PERFORATION OPENINGS ARE: 5 Guazed wrapped 8 Saw cut 11 None (c	pen noie)
1 Continuous slot 3 Mill slot 6 Wire wrapped 9 Drilled holes 2 Louvered shutter 4 Key purched 7 Torch cut 10 Other (specify)	
2 Louveled Shaller 4 Ney punched	
SCREEN-PERFORATED INTERVALS: From	
From	
GRAVEL PACK INTERVALS: From	
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other	
Grout Intervals: From	
What is the nearest source of possible contamination: 10 Livestock pens 14 Abandoned w	
1 Septic tank 4 Lateral lines 7 Pit privy 11 Fuel storage 15 Oil well/Gas v	vell
2 Sewer lines 5 Cess pool 8 Sewage lagoon 12 Fertilizer storage 16 Other (specify	
3 Watertight sewer lines 6 Seepage pit 9 Feedyard 13 Insecticide storage	,
Direction from well? How many feet?	
FROM TO LITHOLOGIC LOG FROM TO PLUGGING INTERVALS	
O 3 Fill	
3 23.5 Silt with some clay	
23.5 45 Fine to coarse sand	
CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisc	liction and v
CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was 1) constructed, (2) reconstructed, or (3) plugged under my jurisd completed on (mo/day/year) and this record is true to the best of my knowledge and water Well Contractor's Licence No.	d belief. Kan
Water Well Contractor's Licence No	
under the business name of Casorschudder, Fix. by (signature)	
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.	artment of Health

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 785-296-5522. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well.