County: Wyandotte	_ Fraction: _	SW SE NW I	1W	Sec	21	т	11	_s r	. 25	_ E	
CORRECTION(S) to WATER WEL	L COMPLE	TION RECORD	Forn	n WWC	C-5 (to	rectify	lacking	g or inc	orrect info	rmation)	
Owner: Colgate-Palmolive										07-5	
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											
						1,		,			
Changed to: Latitude 39.084716	Longitud	e -94.646077									
Comments:											
Verification method:Verified with LEOWEB and KGS mapper											
					Initials:	SH	D	Date: 0	4-15-20	19	
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											

(rev 01/26/2018)

WΔ	TER WELL RECC	)RD Form	n WWC-5	KSA 82a-1	212 ID No	o <i>OB</i>	5-07	7-5				
1 LOCATION OF WATER WELL:	Fraction				ion Number		Township Number			Range Number		
County: Wyandotte	NW 1/4	NW 1/4	NW 1/4		21	Т		S	R	25	<b>⊕</b> /w	
Distance and direction from nearest tow	n or city street ac	dress of well	if located w	thin city?								
A WATER WELL OWNER. CALL	. Ol. b	. (										
2 WATER WELL OWNER: Colga	c Palmolive Kansas A	compan	7			Boar	d of Agric	culture D	ivision (	of Water	Resources	
City State ZID Code	( C. L.	νr				Anni	cation N	umber:				
3 LOCATE WELL'S LOCATION WITH	4 DEPTH OF CO	MPLETED V	VELL	5	ft. ELEVA	TION:						
AN "X" IN SECTION BOX:	Depth(s) Ground	water Encou	ntered 1		ft	. 2		ft. 3			ft.	
N	WELL'S STATIC	WATER LEV	'EL	ft. belo	w land surfac	e measured	on mo/c	lay/yr				
🗙	Pum Est. Yield	ip test data:	Well water v	vas vas	ft. a	aπer after		, hours p	umping	 	gpm	
NW NE	WELL WATER T		AS: 5 Ρι	ıblic water s	upply	8 Air cond	itioning	11 ln	jection v	well		
W E	1 Domestic 2 Irrigation	3 Feedlo 4 Industr	nt 6Oi dal 7D∂	I field water	supply n & garden) e	9 Dewater	ng well	12 0	tner (Sp	ecify be	iow)	
W   E	2 inigation	4 11100511	iai / Di	mestic (ia**	ii a garacii, t	10 monton	19	<b>,</b>				
sw sE	Was a chemical/	/bacteriologic	at sample si	bmitted to E	Department? \	Yes No		: If ves. m	io/day/y	rs sampl	e was sub	
	mitted	bacteriologic	ar sample se	Dirintiod to 2	W	ater Well Dis	sinfected	? Yes	,,,	N	lo	
<u> </u>												
5 TYPE OF BLANK CASING USED:		5 Wrought in	ron	8 Concre	te tile	CASII	NG JOIN				∍d	
1 Steel 3 RMP (SI	-,	6 Asbestos-		9 Other	epecify below							
2 PVC 4 ABS Blank casing diameter		7 Fiberglass										
Casing height above land surface	<b>j</b> in. to	in weigh	. π., Dia nt		ווו. נס	lhs /ft Wall	thicknes	s or quad	e No			
TYPE OF SCREEN OR PERFORATIO		III., <b>W</b> eigi		7 PV				stos-Cem		- 2 /5	`	
1 Steel 3 Stainless		5 Fiberglass		8 RM	P (SR)			(Specify		CPVC	<u>,</u>	
2 Brass 4 Galvaniz	ed Steel	6 Concrete	tile	9 AB	S		12 None	used (op		•		
SCREEN OR PERFORATION OPENIN				d wrapped		8 Saw co			11 No	ne (oper	hole)	
	lill slot		6 Wire w 7 Torch o			10 Other	(specify)				ft.	
SCREEN-PERFORATED INTERVALS:		15	ft to	25	ft. From	l		ft. to			ft	
CONTENT OF THE BUTCH VALUE	From	. 4	ft. to		ft., From	١		ft. to			ft	
GRAVEL PACK INTERVALS	From											
	1710111				11., 1 10111							
	t cement	2 Cement		3 Bent		4 Other						
Grout Intervals: From		ft., Fro	om	ft. to			m					
What is the nearest source of possible			7 Diameiro			tock pens				ned water Gas well	rwell	
1 Septic tank 4 Late 2 Sewer lines 5 Cess	ral lines		7 Pit privy 8 Sewage la	goon	11 Fuel:	siorage izer storage				pecify be	low)	
3 Watertight sewer lines 6 Seep	Feedyard	goon	ticide storag	je .								
Direction from well?	g- p				How mai	-						
FROM TO	LITHOLOGIC	LOG		FROM	TO		PLU	GGING IN	ITERVA	LS		
0 3 Fill												
	some cla	7										
11 12 5:149 5	•	<i>.</i>										
12 18 Clays	and 5:14	<u> </u>					· · · · · · · · · · · · · · · · · · ·					
18 22 Fine	sand											
	five sand											
31 32.5 Clay	The sayo											
	to medium	sand										
7					$=$ $\perp$							
CONTRACTOR'S OR LANDOWNE	R'S CERTIFICAT	FION: This wa	ater well was	s (O constru	ucted, (2) rec	onstructed,	or (3) plu	ugged un	der my	jurisdiction	on and wa	
completed on (mo/day/year) Water Well Contractor's Licence No	=2/13/07 529				and this re was complete			3/1	iowieag	je and be	nei. Nansa	
	SIBCHESCURY		. AND TTAKEN			(signature)	\ L<	6	<u> </u>			
INSTRUCTIONS: Use typewriter or ball point po	en. <i>PLEASE PRESS Fl</i>	RMLY and PRINT	clearly. Please	ill in blanks, unc	derline or circle the	e correct answer	s-Send top	three copie	s to Kansa	s Departme	ent of Health	
and Environment, Bureau of Water, Geology Se records. Fee of \$5.00 for each constructed well	ection, 1000 SW Jackso	on St., Suite 420,	Topeka, Kansas	66612-1367. Tel	lephone 785-296-	5522. Send one	to WATER	WELL OWN	ER and re	tain one for	your	