Location listed as:	Location changed to:
Section-Township-Range: None Given	25-115-5

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

NE SE NE

Other changes: Initial statements: Riley County

Fraction (1/4 1/4 1/4):

Changed to: Grary County

Comments: <u>Section</u>, Township, Range, and quarters were determined by projecting normal Public Land Survey System over Ft. Riley. verification method: <u>Latitude</u> & longitude, and Junction City

1:24,000 topo. map.

initials: RL date: 4/28/2006

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.

			W	ATER WELL REC	ORD Form WWC	-5 KSA 8	2a-1212				
LOCATI	ON OF W	ATER WEL	L:	Fraction		Sec	ction Numb	er Township N	lumber	Range Number	
County:	1311e	У		1/4	1/4	1/4		Т	S	R E/W	
Distance a	nd direction	n from near	rest,	town or city street	address of well if loo	ated within ci	ty?				
Lat /L	ona	39°0	41	734711	96 48 49.	605"	W)				
WATER	WELE OV	VNER: F	t E	Ley Direc	torate of E	nvironm	ent +	Safety			
⊒ RR# St Δ	ddress R	nv # · R1	. L	HOT POWE	ins Ct.	.,,,,,,,			riculture 1	Division of Water Resources	
City, State,	ZIP Code	· · · · · · · · · · · · · · · · · · ·	" F	407 Perst				Application		Sivision of Water Researces	
		OCATION W	//771.1	Ft Riley	KS KS	00 E	4 FLF				
	IN SECTIO		/1117								
AN X	IN SECTION	I BOX:								113/06	
A	i		1		-					* .	
T	 									oumping gpm	
	- INVV	NE	1							oumping gpm	
0				Bore Hole Diame	eter in.	to		t., and		in. to ft.	
₩		<u>-</u>	ΗE	WELL WATER T	O BE USED AS: 5		,	•		njection well	
ī	i 1	i		1 Domestic		Oil field water				Other (Specify below)	
	-sw	SE		2 Irrigation	4 Industrial 7	Domestic (law	m & garden)	10 Monitoring well .	.O.bse.i	cration. Well	
1	!	!		Mas a shaminal	antorialogical carrela a	boottood to Do	nadmant? \	on No	. If was r	no/dou/ura comple was sub	
<u>T</u>		l	J	mitted	acteriological sample s	abmilled to De		ter Well Disinfected		no/day/yrs sample was sub- No	
TYPE O	F BI ANK	CASING US	SED		5 Wrought iron	8 Concr				ed Clamped	
1 Stee		3 RM			6 Asbestos-Cement		(specify be			ded	
2 PVC			•	•		y Older	(Specify be	3.1		aded	
2700	<i>,</i>	4 ABS		1	7 Fiberglass	•	-				
					_					in. to	
Casing he	eight abov	land surfac	е	. 57.7 %	🖈, weight			s./ft. Wall thickness	or gauge N	lo	
TYPE OF	SCREEN	OR PERFO	DRA	TION MATERIAL:		7 PV	С	10 Ast	estos-cen	nent	
1 Stee	1	3 Sta	inles	s steel	5 Fiberglass	8 RM	IP (SR)	11 Oth	er (specify)		
2 Bras	SS	4 Gal	vani	zed steel	6 Concrete tile	9 AB	S	12 Nor	ie used (oj	pen hole)	
SCREEN	OR PERF	ORATION	OPE	NINGS ARE:	5 Gau	zed wrapped		8 Saw cut		11 None (open hole)	
1 Cont	tinuous slo	ot	3 M	lill slot	6 Wire	wrapped		9 Drilled holes			
2 Louv	vered shut	ter	4 K	ey punched	7 Toro	ch cut		10 Other (specify	y)		
SCREEN-	-PERFOR	ATED INTE	RVA	LS: From	ft. to .		ft., Fr	om	ft. t	o	
										o	
	GRAVEL	PACK INTE	RVA	LS: From	ft. to .		ft., Fr	om	ft. t	o ft. [
				From	ft. to .		ft., Fr	om	ft. t	o ft. J	
GROUT	MATERIA	AL: _1 N		ement	2 Cement grout	3 Bentoi	nite /	4 Other 5. %. Re	ntonit	e - Cement 6.000	
Grout Inte	ervals: Fr	rom 8 .0.	,5	ft. to . 3	ft., From		to	ft., From		ft. to	
				ble contamination:				estock pens		bandoned water well	
	tic tank	•		ral lines	7 Pit privy	,					
2 Sewer lines 5 Cess pool		. ,			uel storage 15 Oil well/Gas well ertilizer storage 15 Oil well/Gas well ther (specify below)						
				_							
3 Watertight sewer lines 6 Seepage pit Direction from well?			-			4114 3000					
	from well?	<u> </u>						nany feet? /000			
FROM	то			LITHOLOGIC LO	G	FROM	то			NTERVALS	
						80.5	3,2	5% Bentan	Hs - G	ment Grout	
					,	3.2	0	Topsoil			
	"			······································							
	L										
CONTRA	ACTOR'S	OR LANDO	WNE	:R'S GERTIFICATION	ON: This water well v	was (1) constr	ucted. (2) r	econstructed. or	oliugaea un	der my jurisdiction and was	
CONTR	ACTOR'S	OR LANDO	WNE	R'S CERTIFICATION	ON: This water well v	was (1) constr	ucted, (2) re	econstructed, or (3) period is true to the best	olugged un	der my jurisdiction and was	
				R'S CERTIFICATION	ON: This water well v	was (1) constr	ucted, (2) re	econstructed, or (3) proof is true to the best door (mo/day/yr)	oluggeo un	der my jurisdiction and was owledge and belief. Kansas	
Vater Well	Contracto	r's Licence	No		ON: This water well v	was (1) constr	s complete	d on (mo/day/yr)	olugged un	der my jurisdiction and was owledge and belief. Kansas	
Vater Well		r's Licence	No	R'S GERTIFICATION HCE	ON: This water well v	was (1) constr	s complete	econstructed, or (3) peord is true to the besid on (mo/day/yr)	olugged un	der my jurisdiction and was owledge and belief. Kansas	

INSTRUCTIONS: Use typewriter or ball point pen. <u>PLEASE PRESS FIRMLY</u> and <u>PRINT</u> 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, Topeka, Kansas 66620-0001. Telephone 785-296-5524. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each <u>constructed</u> well.