

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

(to rectify lacking or incorrect information)

Location listed as:

Section-Township-Range: None GivenFraction (  $\frac{1}{4}$   $\frac{1}{4}$   $\frac{1}{4}$ ): \_\_\_\_\_County: Geary

Location changed to:

29-11S-6EE2 W2 NE SWOther changes: Initial statements: Riley CountyChanged to: Geary CountyComments: Legal description determined by projecting normalPublic Land Survey System over Fort Rileyverification method: Latitude and longitude, and Junction City1:24,000 topo. map.initials: DRD date: 5/19/2006

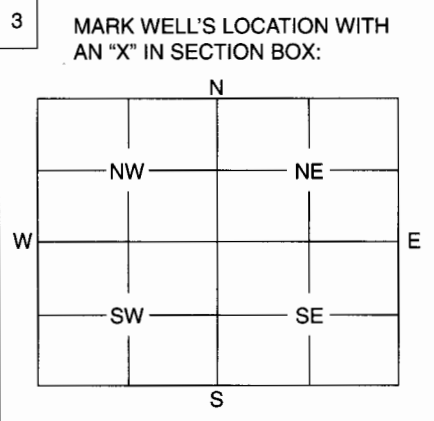
submitted by: Kansas Geological Survey, Data Resources Library, 1930 Constant Ave., Lawrence, KS 66047-3726

to: Kansas Dept of Health &amp; 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: Riley 1/4 1/4 1/4 E/W

Distance and direction from nearest town or city street address of well if located within city?  
Lat Long 39°03'49.995" N 96°47'31.326" W

2 WATER WELL OWNER: Ft Riley Directorate of Envir. & Safety  
 RR #, St. Address, Box #: Bldg 407 Pershing Ct Board of Agriculture, Division of Water Resources  
 City, State, ZIP Code: Ft Riley KS Application Number:



4 DEPTH OF WELL ..... 80.7 ..... ft.  
 WELL'S STATIC WATER LEVEL ..... 78.8 ..... ft.  
 WELL WAS USED AS:  
 1 Domestic 5 Public Water Supply 9 Dewatering  
 2 Irrigation 6 Oil Field Water Supply 10 Monitoring Well  
 3 Feedlot 7 Domestic (Lawn & Garden) 11 Injection Well  
 4 Industrial 8 Air Conditioning 12 Other .....  
 Was a chemical / bacteriological sample submitted to Department? Yes ..... No .....  
 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 7 Fiberglass 9 Other (Specify below)  
 2 PVC 4 ABS 6 Asbestos-Cement 8 Concrete Tile .....  
 Blank casing diameter ..... 2 ..... in. Was casing pulled? Yes X No ..... If yes, how much 4.9 .....  
 Casing height above or below land surface ..... 2.7 ..... in.

6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other 5% Bentonite-Cement Grout  
 Grout Plug Intervals: From 80.7 ..... ft. to 2.7 ..... ft., From ..... ft. to ..... ft., From ..... to ..... ft.  
 What is the nearest source of possible contamination:  
 1 Septic tank 6 Seepage pit 11 Fuel storage 16 Other (specify below)  
 2 Sewer lines 7 Pit privy 12 Fertilizer storage .....  
 3 Watertight sewer lines 8 Sewage lagoon 13 Insecticide storage .....  
 4 Lateral lines 9 Feedyard 14 Abandoned water well .....  
 5 Cess pool 10 Livestock pens 15 Oil well/Gas well .....  
 Direction from well? ..... NE ..... How many feet? ..... 200 .....

FROM	TO	PLUGGING MATERIALS
<u>80.7</u>	<u>2.7</u>	<u>5% Bentonite-Cement Grout</u>
<u>2.7</u>	<u>0</u>	<u>Topsoil</u>

7 CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 2/14/06 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. N/A This Water Well Record was completed on (mo/day/year) 2/24/06 under the business name of USACE by (signature) Jennifer Deary

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., Ste. 420, Topeka, Kansas 66612-1367. Telephone: 785/296-5522. Send one to Water Well Owner and retain one for your records.