

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

County: Geary

Location listed as:

Location changed to:

Section-Township-Range: None Given

27-11 S-6 E

Fraction ($\frac{1}{4}$ $\frac{1}{4}$ $\frac{1}{4}$): _____

NE NE SW SW

Other changes: Initial statements: _____

Changed to: _____

Comments: Legal description determined by projecting normal
Public Land Survey System over Fort Riley.

verification method: Latitude and longitude, and Junction City
1:24,000 topo. map.

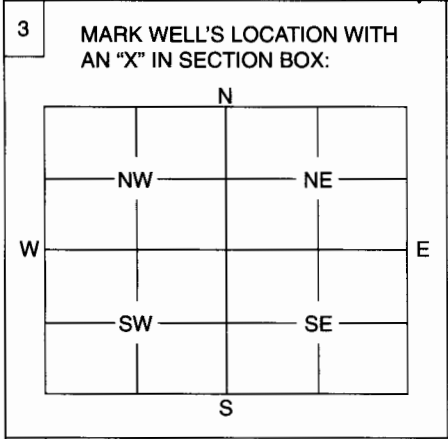
initials: DRJ date: 6/2/2006

Location
 39° 03' 42.926" N
 96° 45' 27.191" W

1	LOCATION OF WATER WELL:	Fraction 1/4 1/4 1/4	Section Number	Township Number	Range Number
County: <u>Geary</u> E/W					

Distance and direction from nearest town or city street address of well if located within city?

2 WATER WELL OWNER: Ft Riley Environmental Division - DPW ATTN: Dave Jones
 RR #, St. Address, Box #: 407 Pershing Ct. Board of Agriculture, Division of Water Resources
 City, State, ZIP Code: Ft Riley, KS 66442 Application Number:



4 DEPTH OF WELL 50.1 ft. from top of casing, 47.3' below ground surface
 WELL'S STATIC WATER LEVEL 22.9 ft. " " " , 20.1 below ground surface
 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 X
 If yes, mo/day/yr sample was submitted

Water Well Disinfected: Yes No X

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 3 in. Was casing pulled? Yes X No If yes, how much 5.8'
 Casing height above or below land surface ~~3.0~~ 3 ft in.

6 GROUT PLUG MATERIAL: Neat cement 2 Cement grout 3 Bentonite 4 Other

Grout Plug Intervals: From 3 ft. to 50.1 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 Abandoned Monitoring well
 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? How many feet? 3

FROM	TO	PLUGGING MATERIALS
<u>0'</u>	<u>3'</u>	<u>Native Material</u>
<u>3'</u>	<u>50.1</u>	<u>Neat Cement</u>

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 4/05/06 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. NA This Water Well Record was completed on (mo/day/year) 4/07/06 under the business name of USACE by (signature) Robert E Woody

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.