

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

(to rectify lacking or incorrect information)

County: Geary

Location listed as:

Section-Township-Range: None Given

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

Location changed to:

27-115-6E

N2 SE NW 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: DRD date: 6/5/2006

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.

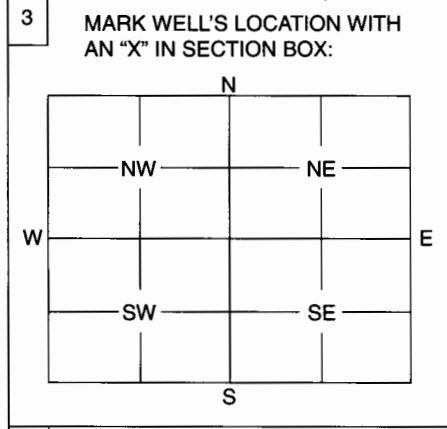
LOCATION Ks State Plane FT  
 268415.30 N  
 1664596.75 E

39° 03' 49.29" N  
 96° 45' 33.62" W

|   |                         |   |         |        |          |        |       |        |
|---|-------------------------|---|---------|--------|----------|--------|-------|--------|
| 1 | LOCATION OF WATER WELL: | Fraction                                  | Section | Number | Township | Number | Range | Number |
|   | County: <u>Geary</u>    | $\frac{1}{4}$ $\frac{1}{4}$ $\frac{1}{4}$ |         |        |          |        |       | 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  
 RR #, St. Address, Box #: Attn: Dave Jones  
407 Purshing Ct  
 City, State, ZIP Code: Ft Riley, KS 66442  
 Board of Agriculture, Division of Water Resources  
 Application Number:



4 DEPTH OF WELL ..... 17.0 ..... ft.  
 WELL'S STATIC WATER LEVEL dry ..... 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 ..... 1 in.      Was casing pulled? Yes  No .....      If yes, how much 4.9 .....  
 Casing height above below and surface ..... 3ft in. ....

6 GROUT PLUG MATERIAL: 1 Neat cement      2 Cement grout      3 Bentonite      4 Other .....

GROUT PLUG INTERVALS: From 5 ft. to 17 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                      racetrack  
 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? E .....      How many feet? 500 .....

| FROM      | TO           | PLUGGING MATERIALS |
|-----------|--------------|--------------------|
| <u>0</u>  | <u>3'</u>    | <u>Native Soil</u> |
| <u>3'</u> | <u>17.0'</u> | <u>Neat Cement</u> |
|           |              |                    |
|           |              |                    |
|           |              |                    |
|           |              |                    |

7 CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 3/25/06 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) 04.107.06 under the business name of USACE by (signature) Arden P. Williams

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.