

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

(to rectify lacking or incorrect information)

County: Gearv

Location listed as:

Section-Township-Range: None Given

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

Location changed to:

32-115-6E

W2 E2 NE NE

Other changes: Initial statements: \_\_\_\_\_

Changed to: \_\_\_\_\_

Comments: Section, township, and range determined by projecting normal Kansas survey system over Fort Riley.

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

initials: DRJ date: 2/14/2007

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.

265783.96 N  
1658203.14 E

KANSAS State Plan  
NAD 83 1501 N Feet  
WATER WELL PLUGGING RECORD Form WWC-5P

Geographic coord.  
N39 03 24.12  
E 96 46 54.14  
KSA 82a-1212 ID NO. 13354-00-2221

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: Attn Bob Anderson  
 RR #, St. Address, Box #: Bldg 407 Penning Ct. Board of Agriculture, Division of Water Resources  
 City, State, ZIP Code: Ft Riley, KS 66442 Application Number:

3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:

N		
NW		NE
W		E
SW		SE
S		

4 DEPTH OF WELL 23.9 ft.  
 WELL'S STATIC WATER LEVEL 12.6 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 X.....  
 If yes, mo/day/yr sample was submitted NA.....  
 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 1 in.    Was casing pulled? Yes ..... No .....    If yes, how much BA 30' 5.5ft  
 Casing height above or below land surface 3.6 in.

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

Grout Plug Intervals: From 3 ft. to 23.9 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? ..... How many feet? .....

FROM	TO	PLUGGING MATERIALS
0	3	Native Soil
3	23.9	Neat Cement

7 CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 18 July 2006 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) 21 July 2006 under the business name of US Army Corps of Engineer by (signature) Arthur J. 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.