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

Geary

County:

(to rectify lacking or incorrect information)

Location listed as:	Location changed to:
Section-Township-Range: None Given	29-115-6E
Fraction ( 1/4 1/4 1/4):	SE NW SE SW
Other changes: Initial statements:	
Changed to:	
Comments: <u>Section</u> township, and ran	ge determined by projecting
Comments: <u>Section</u> , township, and range normal Kansas survey system	over Fort Riley.
verification method: Latitude & longitude,	and Junction City
1:24,000 topo. map.	
	initials: DRL date: 2/14/2007
1 to 11 Tr	7

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.

267339.41 N FANSAS State Plane Bossinphic Coord.
N 39 03 39.89

1655304, 46 E WATER WELL PLUGGING RECORD FORM WWC-5P KSA 82a-1212 ID NO. DC F 96-30 PZ

1	LOCATION	ON OF WATE	ER WELL:		Fraction	Section	Number	Township	Number	Range	Number
Cou	unty:	eary			1/4 1/4 1/4						E/W
		irection from	nearest town	or ci	ty street address of well if loo	ated within city	<i>i</i> ?				
								_			
2	WATER	WELL OWN	ER: <b>F</b> + 7	2ile	Y ENVIRONMEN	tal Div	SION	AHN:	Bob A	Incleps	on
	RR #. St.	Address. Bo	x#:Bldg	4	107 Pershing C			e, Division of V			
	City, State	e, ZIP Code	Ft	Ĺ	iley, KS. 66	442 Appli	cation Numbe	r:			
3 MARK WELL'S LOCATION WITH					4 DEPTH OF WELL	27.5	5 ft.	BLS			
	AN "X" IN SECTION BOX:				WELL'S STATIC WATE	R LEVEL	7.9 ft.	B65			
	N I				WELL WAS USED AS						
	NW		— NE		1 Domestic 2 Irrigation		Water Supply old Water Supp		9 Dewater 10 Monitorir		
w				E	3 Feedlot 4 Industrial		stic (Lawn & C	Garden)	11 Injection	Well	
				-			Ū				
	sw		- SE	-	Was a chemical / bacteriole If yes, mo/day/yr sample w	ogical sample s	submitted to D	epartment? Ye	s	No	
							~ <u>~</u>	•••••			
		S		_	Water Well Disinfected: Y	esNo					·
5	TYPE O	F BLANK CA	ASING USED	 ):							
5	1 Steel	-		Wro	ught 7 Fiberg	loce 0 O	ther (Specify b	oolow)			
	2 PVC	4 ABS			estos-Cement 8 Concre					B	A
	Blank c	asing diamet	er/2	in.	Was casing pulled?	Yes	No .	1	f yes, how mu	ıch <i>3</i>	960
	Casing	height above	e o below an	nd sur	face3.6	in.					
6		PLUG MATE			at cement 2 Cement gro			Other			
		lug Intervals:		n		, From	ft. t	to ft	., From	to	o ft
			source or pos	ssible	contamination: 6 Seepage pit	11 Euol	etorago		16 Other (see	oify bolow)	
1 Septic tank 2 Sewer lines				7 Pit privy	12 Fert	11 Fuel storage 16 Other (specify beld 12 Fertilizer storage					
3 Watertight sewer lines 4 Lateral lines				<ul><li>8 Sewage lagoon</li><li>9 Feedvard</li></ul>		13 Insecticide storage 14 Abandoned water well					
		ess pool			10 Livestock pens		vell/Gas well				
	Direction	on from well?			How man	y feet?					
_	FROM			DLI	ICCINC MATERIALS						
	FROM	TO			JGGING MATERIALS						
	<b>D</b>	3	Na	41	comout						
	3	27.5	Non,	<u> </u>	concut						
					· · · · · · · · · · · · · · · · · · ·						
_											
7	CONTF (mo/day	RACTOR'S v/year)	of Lando	WNE	R'S CERTIFICATION: Th	is water well and thi					
			r's License No	o	NA		This W	ater Well Rec	ord was com	pleted on (m	no/day/year)
	by (sig	nature)	unde		our inesemane of	Hrm	7 601	pr. O.F	LNG.	1.416.6143	
IN	ISTRUCTION	ONS: Use to	vpewriter or	ball	point pen. <u>Please press f</u> i	rmly and prin	t clearly Ple	ase fill in bla	nks underlir	ne or circle	the correct
					as Department of Health						

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