

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

(to rectify lacking or incorrect information)

County: Geary

Location listed as:

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

Location changed to:

29-11S-6ENE SE SW

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: DRL date: 2/14/2007submitted 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.

267387.56 N
1655551.03 E

KANSAS State Plane
NAD83 1501 N Feet

Geographic Coord.
N39 03 40.33
E 96 47 28.47
ID NO. DCF94-22

WATER WELL PLUGGING RECORD Form WWC-5P

KSA 82a-1212

ID NO.

DCF94-22

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

3	MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4	DEPTH OF WELL <u>18</u> ft. <u>B6S</u>				
<div style="text-align: center;">N</div> <table border="1"><tr><td>NW</td><td>NE</td></tr><tr><td>SW</td><td>SE</td></tr></table> <div style="text-align: center;">S</div>		NW	NE	SW	SE	WELL'S STATIC WATER LEVEL <u>18</u> ft. <u>B6S</u>	
		NW	NE				
SW	SE						
		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 <u>X</u>							
If yes, mo/day/yr sample was submitted <u>NA</u>							
Water Well Disinfected: Yes No <u>X</u>							

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 <u>2</u> in. Was casing pulled? Yes <u>X</u> No	
Casing height above or below land surface <u>36</u> in. If yes, how much <u>BA 3.0 5.0 ft</u>	

6	GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other
Grout Plug Intervals: From <u>3</u> ft. to <u>18</u> ft. From to From to	
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	18	Neat Cement

7	CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) <u>06 July 2006</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>NA</u> This Water Well Record was completed on (mo/day/year) <u>24 July 2006</u> under the business name of <u>US Army Corps of Engineers</u> by (signature) <u>Robert E. [Signature]</u>
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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.