

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

County: Geary

Location listed as:

Section-Township-Range: None

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

Location changed to:

34 - T11 - 6E

- NW SE NW

Other changes: Initial statements: _____

Changed to: _____

Comments: _____

verification method: LEO, USGS Topo map

initials: PT date: 12/14/09

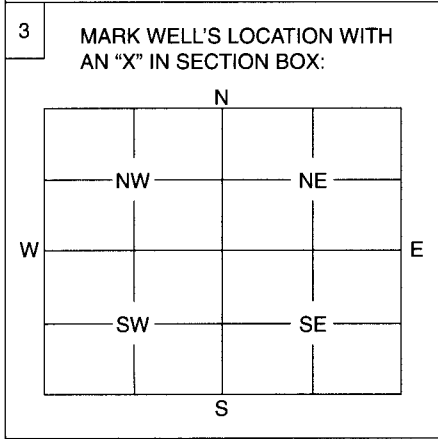
submitted by: Kansas Geological Survey, Data Resources Library, 1930 Constant Ave., Lawrence, KS 66047-3726
to: Kansas Dept of Health & Environment, Bureau of Water, 1000 SW Jackson, Suite 420, Topeka, KS 66612-1367.

N 3903 11.850
E 9645 20.085

1 LOCATION OF WATER WELL: Fraction $\frac{1}{4}$ $\frac{1}{4}$ $\frac{1}{4}$ Section Number Township Number Range Number
County: E/W

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

2 WATER WELL OWNER:
RR #, St. Address, Box #: Board of Agriculture, Division of Water Resources
City, State, ZIP Code : Application Number:



4 DEPTH OF WELL 24.50 ft. TOC
WELL'S STATIC WATER LEVEL 191.7 ft. TOC
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 2" in. Was casing pulled? Yes X No If yes, how much 24.5-feet
Casing height above or below land surface +36 in.

6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other Cement Bentonite Grout
Grout Plug Intervals: From 3 ft. to 21.5 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 Material
3	21.5	Cement Bentonite Grout

7 CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 23 Sept 09 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. This Water Well Record was completed on (mo/day/year) 23 Sep 09 under the business name of U.S Army by (signature) Robert E. Ward

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.