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

weating of incorrect information)							
Location listed as:	County: Rivey						
Section-Township Power	Location changed to:						
Section-Township-Range:	-12-115-6E						
Fraction (1/4 1/4 1/4): None Given							
Other changes: Initial statements:	NW SW SE SW						
Other changes: Initial statements: State Plane Coordinates	2283/29.0 N, 23633/3,3 E						
Changed to: Latitude: 39°6' 13.24522", Long	gitude: 96° 43' 11.01863 (NAD 27)						
Comments: Regular Public Land Survey	x System projected over						
verification method: Written description & are Coordinates/Latitude & Longitude, KGS'  Ogden 1:24,000 topo map.  submitted by: Kansas Geological Survey Data Resources Library	ea road map State Plans						
Coordinates/Latitude & Longitude, KGS'	"LEO" conversion tool and						
Ogden 1:24,000 topo map.	initials: DR date: 7/13/2019						
submitted by: Kansas Geological Survey, Data Resources Library, 1930 Conto: Kansas Dept of Health & Environment, Bureau of Water, 1000 SW Jacks	istant Ave., Lawrence, KS 66047-3726 son, Suite 420, Topeka, KS 66612-1367						

	WATER WELL RECOF		WC-5	KSA 82a			
1 LOCATION OF WATER WELL:	Fraction * See below		1	n Number		/	Range Number
County: Riley	1/4 1/4	1/4			J T (	<u>(                                    </u>	R ( EW
Distance and direction from nearest town of			-	1	1	-	0.1 5 777.1
NE corner L St. & 4th St.	Compared Engineering	Fo	rt Kl.	rey, KS	)		245-VW
2 WATER WELL OWNER: US Army					rs I		mat tata a 28 MAR A
RR#, St. Address, Box # : 601 E 12						•	Division of Water Resource
	City, MO 64106	21	5			ion Number:	
LOCATE WELL'S LOCATION WITH 4 AN "X" IN SECTION BOX:							
N I De	epth(s) Groundwater Encounter ELL'S STATIC WATER LEVEL						
1     W							mping gpn
wa NW as a NEwa	eump test data: vve st. Yield gpm: We						
	ore Hole Diameter	in to 2	1.5	ft	and	in	to ff
A BESTELLI CONTROL OF THE PROPERTY OF THE PROP	ELL WATER TO BE USED AS				8 Air conditioni		Injection well
=	1 Domestic 3 Feedlot			supply	9 Dewatering	(a)	Other (Specify below)
600 000 SW 000 000 E00 SE 000 670	2 Irrigation 4 Industri			den only	10 Monitoring w	ell Vapor	Extraction
	as a chemical/bacteriological sa						
Contractive of the contractive o	itted	,	- 10 - 0p.		ater Well Disinfe		No
5 TYPE OF BLANK CASING USED:	5 Wrought iron	n 8	Concrete				d Clamped
1 Steel 3 RMP (SR)	6 Asbestos-Ce		Other (sp	pecify below	w)	Weld	led
②PVC 4 ABS	7 Fiberglass			<i></i>		Thre	aded <b>X</b>
Blank casing diameter . 10-5. 2in.	. to21 • 5 ft., Dia .		.in. to		ft., Dia		in. to ft
Casing height above land surface	in., weight $F1.u$	sh Mount.	Well.	Coverbs.	ft. Wall thicknes	s or gauge N	oSCH. 40
TYPE OF SCREEN OR PERFORATION N	MATERIAL:	(	7) PVC		10 A	Asbestos-ceme	ent
1 Steel 3 Stainless st	teel 5 Fiberglass		8 RMP	(SR)	11 (	Other (specify)	
2 Brass 4 Galvanized		9	9 ABS		12 N	lone used (op	en hole)
SCREEN OR PERFORATION OPENINGS		Gauzed wrap	•		8 Saw cut		11 None (open hole)
1 Continuous slot (3)Mill s		Wire wrapped	i		9 Drilled hole		
		Torch cut					
SCREEN-PERFORATED INTERVALS:	From						
GRAVEL PACK INTERVALS:	From						
GHAVEE FACK INTERVACS.		t. to		•		ft.	
6 GROUT MATERIAL: 1 Neat cer							
Grout Intervals: From3.5ft.	ment ②Cement grout to 5.5 . ft., From	5 . 5	, ft. to.	8.0	ft., From		ft. to
What is the nearest source of possible co							bandoned water well
1 Septic tank 4 Lateral	lines 7 Pit pr	rivy		11 Fuel	storage	15 C	il well/Gas well
2 Sewer lines 5 Cess po	ool 8 Sewa	ige lagoon		12 Fertil	lizer storage	(16)	Other (specify below)
3 Watertight sewer lines 6 Seepag	e pit 9 Feed	yard		13 Insec	cticide storage	UST S	ite
Direction from well?		4.		How ma	iny feet?		
FROM TO	LITHOLOGIC LOG		ОМ	то		PLUGGING	NTERVALS
1.7 A. S. C.	to Brown Silty Cla	У					
17' 21' Brown Sandy	Silt						
					Mark of Mark o	Normalist Add	
Togetien	eferenced to Ft. Ri	Tor Dotum					
Location re	refered to rt. kr	rey Datum					
-60 N-10	I from			A		-,	100 100 100 100 100 100 100 100 100 100
-TSO 392:						,	200-21-000-1-00-1-00-1-00-1-00-1-00-1-0
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2363303					on the second se		
1049.5 H	The state of the s						
	11 March 1971 1971 1971 1971 1971 1971 1971 197						
7 CONTRACTOR'S OR LANDOWNER'S	S CERTIFICATION: This water	well was AT	dnstructe	ed. (2) rec	onstructed or (	3) pluaged un	der my jurisdiction and wa
completed on (mo/day/year) 9/18/9	95						nowledge and belief. Kansa
Water Well Contractor's License No	510 This W					1-2	2-96
under the business name of MIKON (		••		by (signa		aio P	Same
INSTRUCTIONS: Use typewriter or ball point per		learly. Please fill in	blanks, und				copies to Kansas Department
of Health and Environment, Bureau of Water, To	opeka, Kansas 66620-0001. Telephone:	913-296-5545. Send	d one to WA	ATER WELL C	OWNER and retain or	ne for your record	s.