

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

(to rectify lacking or incorrect information)

County: Shawnee

Location listed as:

Section-Township-Range: None Given

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

Location changed to:

29-125-17E

NW NE NE

Other changes: Initial statements: _____

Changed to: _____

Comments: _____

verification method: well address, area street map, and mapping tool on KGS website.

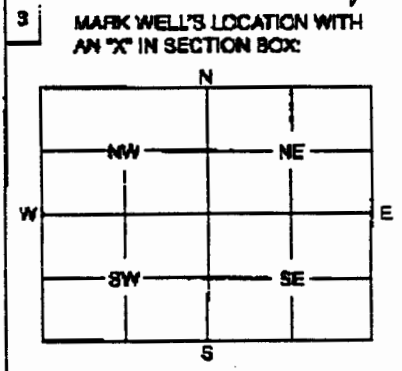
initials: DR date: 9/28/2006

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.

1 LOCATION OF WATER WELL: 6621 SE 45th Fraction 1/4 1/4 1/4 Section Number _____ Township Number _____ Range Number _____
 County: Shawnee E/W
 Distance and direction from nearest town or city street address of well if located within city?

2 WATER WELL OWNER: Braxton Copley
 RR #, St. Address, Box #: 6621 SE 45th St. Board of Agriculture, Division of Water Resources
 City, State, ZIP Code: Topeka KS Application Number: _____



4 DEPTH OF WELL 18 ft.
 WELL'S STATIC WATER LEVEL 10 ft.
 WELL WAS USED AS:
 1 Domestic 5 Public Water Supply 9 Dewatering
 2 Irrigation 6 Oil Field Water Supply 10 Monitoring Well
 3 Pactor 7 Domestic (Lawn & Garden) 11 Injection Well
 4 Industrial 8 Air Conditioning 12 Other Abandoned
 Was a chemical / bacteriological sample submitted to Department? Yes _____ No ✓
 If yes, mo/day/yr sample was submitted _____
 Water Well Disinfected: Yes ✓ No _____

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 12 in. Was casing pulled? Yes _____ No ✓ If yes, how much _____
 Casing height above or below land surface 10 inches in. below ground surface

6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other _____
 Grout Plug Interval: From 5.5' ft. to 5' ft. From _____ ft. to _____ ft. From _____ to _____ ft.
 What is the nearest source of possible contamination:
 1 Septic tank 8 Sewage pit 11 Fuel storage 16 Other (specify below) _____
 2 Sewer lines 9 PR privy 12 Fertilizer storage
 3 Watertight sewer lines 10 Sewage lagoon 13 Insecticide storage
 4 Lateral lines 11 Feedyard 14 Abandoned water well
 5 Cess pool 12 Livestock pens 15 Oil well/Gas well
 Direction from well? _____ How many feet? _____

FROM	TO	PLUGGING MATERIALS
<u>18</u>	<u>10</u>	<u>sand</u>
<u>10</u>	<u>5.5</u>	<u>clay</u>
<u>5.5</u>	<u>5</u>	<u>Bentonite</u>
<u>5</u>	<u>0</u>	<u>topsoil</u>

7 CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 7-25-06 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) _____
 by (signature) [Signature]

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: 785/298-5522. Send one to Water Well Owner and retain one for your records.

Well plugged by Vike Petesch.
 Inspection by Gary Larson