

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

County: Douglas

Location listed as:

Section-Township-Range: 31-12-20E

Fraction (1/4 1/4 1/4): SW SW NW

Location changed to:

31-12S-20E

S2 SE NW

Other changes: Initial statements: _____

Changed to: _____

Comments: _____

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

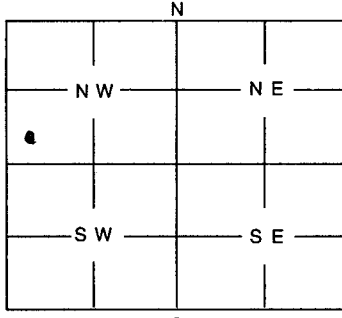
initials: ERL date: 9/29/2010

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: County: <u>DOUGLAS</u>	Fraction <u>SW 1/4 SW 1/4 NW 1/4</u>	Section Number <u>31</u>	Township Number <u>12</u>	Range Number <u>70E</u>
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Distance and direction from nearest town or city street address of well if located within city?
1002 NEW HAMPSHIRE, LAWRENCE, KS

2	WATER WELL OWNER: RR #, St. Address, Box #: City, State, ZIP Code :	<u>CLIVE CRAMER</u> <u>2417 MANCHESTER</u> <u>LAWRENCE, KS 66044</u>	Board of Agriculture, Division of Water Resources Application Number:
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3	MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX: 	4	DEPTH OF WELL <u>15</u> ft WELL'S STATIC WATER LEVEL <u>8.03</u> ft 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 <input checked="" type="checkbox"/> If yes, mo/day/yr sample was submitted Water Well Disinfected: Yes No <input checked="" type="checkbox"/>
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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>7.315</u> in. Was casing pulled? Yes No <input checked="" type="checkbox"/> If yes, how much Casing height above or below land surface <u>N/A</u> in.
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6	GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other <u>COMPACTED SOILS</u> Grout Plug Intervals: From ft. to 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 (<u>FURNACE</u>) 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? <u>WSW</u> How many feet? <u>60</u>
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FROM	TO	PLUGGING MATERIALS
<u>0</u>	<u>3</u>	<u>COMPACTED SOILS</u>
<u>3</u>	<u>15</u>	<u>BENTONITE CHIPS</u>

7	CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>1113/01</u> under the business name of <u>QUAD STATE SERVICES, INC.</u> This Water Well Record was completed on (mo/day/year) by (signature) <u>[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, Topeka, Kansas 66620-0001. Telephone: 785/296-3565. Send one to Water Well Owner and retain one for your records.