

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

(to rectify lacking or incorrect information)

Location listed as:

County: Douglas

Location ~~changed to:~~

29 - 12 S - 20 E

NW NE SE

Section-Township-Range: _____

Fraction (1/4 1/4 1/4): _____

Other changes: Initial statements: Jefferson County

Changed to: Douglas County

Comments: _____

verification method: written & legal descriptions, city street map, and mapping tool & aerial photos on KGS website.

initials: ARL date: 12/21/2005

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:	Fraction	Section	Number	Township	Number	Range	Number
County: Jefferson	NW ¼ NE ¼ SE ¼	29		12 S		20	EW

Distance and direction from nearest town or city street address of well if located within city?
Corner of 9th and Oak St., Lawrence, KS

2 WATER WELL OWNER: FMC Corp.	1735 Market St.	Board of Agriculture, Division of Water Resources
RR #, St. Address, Box #:	Philadelphia, PA 19103	Application Number:
City, State, ZIP Code :		

3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4 DEPTH OF WELL 33.7 ft.												
<div style="text-align: center;"> </div>	WELL'S STATIC WATER LEVEL 18.1 ft. WELL WAS USED AS: <table style="width:100%; border: none;"> <tr> <td style="width:33%;">1 Domestic</td> <td style="width:33%;">5 Public Water Supply</td> <td style="width:33%;">9 Dewatering</td> </tr> <tr> <td>2 Irrigation</td> <td>6 Oil Field Water Supply</td> <td><input checked="" type="checkbox"/> 10 Monitoring Well</td> </tr> <tr> <td>3 Feedlot</td> <td>7 Domestic (Lawn & Garden)</td> <td>11 Injection Well</td> </tr> <tr> <td>4 Industrial</td> <td>8 Air Conditioning</td> <td>12 Other</td> </tr> </table>	1 Domestic	5 Public Water Supply	9 Dewatering	2 Irrigation	6 Oil Field Water Supply	<input checked="" type="checkbox"/> 10 Monitoring Well	3 Feedlot	7 Domestic (Lawn & Garden)	11 Injection Well	4 Industrial	8 Air Conditioning	12 Other
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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:

<input checked="" type="checkbox"/> 1 Steel	<input type="checkbox"/> 3 RMP (SR)	<input type="checkbox"/> 5 Wrought	<input type="checkbox"/> 7 Fiberglass	<input type="checkbox"/> 9 Other (Specify below)
<input type="checkbox"/> 2 PVC	<input type="checkbox"/> 4 ABS	<input type="checkbox"/> 6 Asbestos-Cement	<input type="checkbox"/> 8 Concrete Tile	

Blank casing diameter **4** in. Was casing pulled? Yes No **X**..... If yes, how much

Casing height above or below and surface **36"** in.

6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other **Bentonite chips**

Grout Plug Intervals: From **33.7** ft. to **3.0** 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
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

16 Other (specify below)
Farm field

Direction from well? **N/A** How many feet? **N/A**

FROM	TO	PLUGGING MATERIALS
33.7	3.0	Bentonite chips
3.0	0	Top soil

MW-D-2

7 CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) **11-08-05** and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **665** This Water Well Record was completed on (mo/day/year) **11-10-05** under the business name of **Pratt Well Environmental** 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: 785/296-5522. Send one to Water Well Owner and retain one for your records.