

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

(to rectify lacking or incorrect information)

County: Johnson

Location listed as:

Location changed to:

Section-Township-Range: 24-12 S-22 E24-12 S-22 EFraction (  $\frac{1}{4}$   $\frac{1}{4}$   $\frac{1}{4}$ ): None GivenSW SW SW

Other changes: Initial statements: \_\_\_\_\_

Changed to: \_\_\_\_\_

Comments: well #1 is ~100 yds. W. of well #2.verification method: Phone call to well contractor, and mapping  
tool on KGS website.initials: DRL date: 10/4/2006

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.

## WATER WELL PLUGGING RECORD Form WWC-5P

KSA 82a-1212 ID NO.

1 LOCATION OF WATER WELL: County: <u>Johnson</u>	Fraction $\frac{1}{4}$ $\frac{1}{4}$ $\frac{1}{4}$	Section Number <u>24</u>	Township Number <u>12S</u>	Range Number <u>122</u> <u>EW</u>
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Distance and direction from nearest town or city street address of well if located within city?

1/2 mile NE of Desoto Kansas

## 2 WATER WELL OWNER:

 RR#, St. Address, Box #: P.O. Box 768  
 City, State ZIP Code: City of Olathe Kansas 66061

Global Positioning Systems (decimal degrees, min. of 4 digits)

Latitude: \_\_\_\_\_

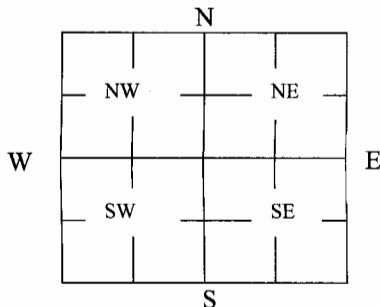
Longitude: \_\_\_\_\_

Elevation: \_\_\_\_\_

Datum: \_\_\_\_\_

Data Collection Method: \_\_\_\_\_

## 3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:

4 DEPTH OF WELL 68' 8" ft. From ground levelWELL'S STATIC WATER LEVEL 37' ft

WELL WAS USED AS:

- |              |                              |                   |
|--------------|------------------------------|-------------------|
| 1 Domestic   | <u>5 Public Water Supply</u> | 9 Dewatering      |
| 2 Irrigation | 6 Oil Field Water Supply     | 10 Monitoring     |
| 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

## 5 TYPE OF BLANK CASING USED:

- |                |            |                   |                 |                               |
|----------------|------------|-------------------|-----------------|-------------------------------|
| <u>1 Steel</u> | 3 RMP (SR) | 5 Wrought         | 7 Fiberglass    | 9 Other (Specify below) _____ |
| 2 PVC          | 4 ABS      | 6 Asbestos-Cement | 8 Concrete Tile |                               |

Blank casing diameter 10" in. Was casing pulled? Yes \_\_\_\_\_ No X If yes, how much \_\_\_\_\_Casing height above or below land surface 160" in.

Well #1

6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other ClorinationsandGrout Plug Intervals: From 68' 8" ft. to 6' ft., From 6' ft. to 3' 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) <u>other well</u> |
| 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 | Direction from well? <u>NE</u>             |
| 5 Cess pool              | 10 Livestock pens | 15 Oil well/Gas well    | How many feet? <u>200 ft</u>               |

FROM	TO	PLUGGING MATERIALS	FROM	TO	PLUGGING MATERIALS
<u>68' 8"</u>	<u>6'</u>	<u>Clorination sand</u>			
<u>6'</u>	<u>3'</u>	<u>Neat cement</u>			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 8-25-06 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 617. This Water Well Record was completed on (mo/day/year) 9-12-06 under the business name of Douglas Pump by (signature) [Signature]

INSTRUCTIONS: Use typewriter or ballpoint 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. Visit us at <http://www.kdheks.gov/geo/waterwells>.