

County: Geary Fraction: NW SW NE NE Sec. 2 T 12 S R 5 E

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

Owner: City of Junction City

If location corrected, was listed as:

Location changed to:

Section-Township-Range: 11-12S-5E

2-12S-5E

Fraction (¼ calls): C NW

NW SW NE NE

Other changes: Initial statements: well was located at 1400 Broadway, Great Bend, KS 67530

Changed to: 540 West 18<sup>th</sup> St., Junction City, KS

Comments: Section, township, range, and quarters assigned by projecting regular Public Land Survey System over the area.

Verification method: Information given on original construction record (including wellsite address), and KGS' online WWC5 mapping tool & aerial photos. Initials: DRL Date: 5/30/2019

Submitted by:  Kansas Geological Survey, Data Resources Library, 1930 Constant Avenue, Lawrence, KS 66047-3724  
 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.

MW-1

<b>1 LOCATION OF WATER WELL:</b> Geary County	Fraction ¼ C ¼ NW ¼	Section Number 11	Township Number 12 S	Range Number R 5 E
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Distance and direction from nearest town or city street address of well if located within city?  
**Well was located at 1400 Broadway, Great Bend, KS, 67530**

<b>2 WATER WELL OWNER:</b> City of Junction City RR#, St. Address, Box #: <b>P.O. Box 287</b> City, State ZIP Code: <b>Junction City, KS 66441</b>	<b>Global Positioning Systems</b> (decimal degrees, min. of 4 digits) Latitude: _____ Longitude: _____ Elevation: _____ Datum: _____ Data Collection Method: _____
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**3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:**

**4 DEPTH OF WELL** 51.50 ft.

WELL'S STATIC WATER LEVEL 45.81 ft

WELL WAS USED AS:  X

1 Domestic	5 Public Water Supply	9 Dewatering
2 Irrigation	6 Oil Field Water Supply	<input checked="" type="checkbox"/> 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:**

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

Blank casing diameter 2 in. Was casing pulled? Yes  x No \_\_\_\_\_ If yes, how much 3'

Casing height above or below land surface 36 in.

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

Grout Plug Intervals: From 2\_0\_ ft. to 0.5 ft., From 4\_0.5\_ ft. to 3.5 ft., From 3\_3.5\_ to 51.50 ft.

What is the nearest source of possible contamination:

- |                          |                   |                         |                            |
|--------------------------|-------------------|-------------------------|----------------------------|
| 1 Septic tank            | 6 Seepage pit     | 11 Fuel Storage         | 16 Other (specify below)   |
| 2 Sewer lines            | 7 Pit privy       | 12 Fertilizer storage   | _____ Contaminated Site    |
| 3 Watertight sewer lines | 8 Sewage lagoon   | 13 Insecticide storage  |                            |
| 4 Lateral lines          | 9 Feedyard        | 14 Abandoned water well | Direction from well? _____ |
| 5 Cess pool              | 10 Livestock pens | 15 Oil well/Gas well    | How many feet? _____       |

FROM	TO	PLUGGING MATERIALS	FROM	TO	PLUGGING MATERIALS
0'	0.5'	Asphalt			
0.5'	3.5'	Compacted Soil			
3.5'	51.50'	Bentonite Chips			

**7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:** This water well was plugged under my jurisdiction and was completed on (mo/day/year) 04/25/13 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 585. This Water Well Record was completed on (mo/day/year) 05/01/13 under the business name of Associated Environmental, Inc. by (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/waterwell/index.html>.