| County:   | Shawnee            | Fraction: NW, NW, NW | , NE    | Sec            | 2        | _ T       | 13    | s      | R      | 14        | Ε       |
|---|--------------------|----------------------|---------|----------------|----------|-----------|-------|--------|--------|-----------|---------|
| CORRECTIO   | ON(S) to WATER WEL | L COMPLETION RECORD  | Forn    | n WWC          | -5 (to   | rectify l | ackin | g or i | ncorre | ect infor | mation) |
| Owner: Ofe  | lia P. Tolan       |                      |         |                |          |           |       |        |        |           |         |
| If location cor   |                    | Locati               | ion cha | inged to:      | ;        |           |       |        |        |           |         |
| Section-Towns   | hip-Range:         |                      |         |                |          |           |       |        |        |           |         |
| Fraction (1/4 calls): Not provided  |                    |                      |         | NW, NW, NW, NE |          |           |       |        |        |           |         |
| Other changes: Initial statements:  |                    |                      |         |                |          |           |       |        |        |           |         |
|   |                    |                      |         |                |          |           |       |        |        |           |         |
| Changed to:   |                    |                      |         |                |          |           |       |        |        |           |         |
|   |                    |                      |         |                |          |           |       |        |        |           |         |
| Comments: Well in basement of house at 8649 SW 61st St., Topeka, KS 66610. Lat. 38.955882 and   |                    |                      |         |                |          |           |       |        | nd     |           |         |
| Long95.826046 (WGS 84)  |                    |                      |         |                |          |           |       |        |        |           |         |
| Verification method: Talked to SN Co. Health Dept. staff. Confirmed location using SN Co Appraiser  |                    |                      |         |                |          |           |       |        |        |           |         |
| website, Google Earth, and Ks STR Finder.   |                    |                      |         |                |          |           |       |        |        |           |         |
|   |                    |                      |         | 1              | nitials: | PKC       |       | Date:  | 2/6/   | 2019      |         |
| Submitted by: Kansas Geological Survey, Data Resources Library, 1930 Constant Ave., Lawrence, KS 66047-3724  Kansas Dept. of Health & Environment, Bureau of Water, 1000 SW Jackson, Suite 420, Topeka, KS 66612-1367 |                    |                      |         |                |          |           |       |        |        |           |         |

(rev 01/26/2018)

| W  | <u>ATER WELL PLUGGING RI</u>  | ECORD Form WV                                     | VC-5P KSA 82a-                 | -1212 ID NO. 🗀          |                      |  |  |  |  |  |
|--|---|---|--------------------------------|-------------------------|----------------------|--|--|--|--|--|
| 1  | LOCATION OF WATER WELL:   | Fraction  | Section Number                 | Township Number         | Range Number         |  |  |  |  |  |
|  | Distance and direction from nearest town or city street address of well if located within city?                 |   |                                |                         |                      |  |  |  |  |  |
|  | 8649 SW 6   | 1/5+ 5+   | 1 ope ka                       | Systems (decimal degree | 610                  |  |  |  |  |  |
| 2  | 8649 SM/ (WATER WELL OWNER: Ofe   | lia P. Tolan                                      | Global Positioning             | Systems (decimal degree | es, min. of 4 digits |  |  |  |  |  |
|  | RR#, St. Address, Box #: 8k49 5w 6/st 5r.  Latitude:  Longitude:  Elevation:                                    |   |                                |                         |                      |  |  |  |  |  |
|  | City. State ZIP Code: Topcket   | , KS 66610  | Datum: Data Collection Method: |                         |                      |  |  |  |  |  |
| 3  | MARK WELL'S LOCATION  | 4 DEPTH OF WELL 35 ft.                            |                                |                         |                      |  |  |  |  |  |
|  | WITH AN "X" IN SECTION BOX:   | WELL'S STATIC WATER LEVELfi                       |                                |                         |                      |  |  |  |  |  |
|  | N   | WELL WAS USED AS:                                 |                                |                         |                      |  |  |  |  |  |
|  | - NW NE   | (Î-Domestic                                       | 5 Public Water Supp            | oly 9 Dewat             | tering               |  |  |  |  |  |
| W  | /   | 2 Irrigation                                      | 6 Oil Field Water S            | upply 10 Monit          | toring               |  |  |  |  |  |
| V  | SW SE   | 3 Feedlot 7 Domestic (Lawn & Garden) 11 Injection |                                |                         |                      |  |  |  |  |  |
|  | 5W 5L   |   | _                              |                         |                      |  |  |  |  |  |
|  | S   | was a chemical/bac                                | teriological sample subm       | tted to Department? Ye  | s No <u>Z</u>        |  |  |  |  |  |
| 5  | TYPE OF BLANK CASING USED   |   | O Oth                          | on (Consisted by Land)  |                      |  |  |  |  |  |
|  | 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 in. Was easing pulled? Yes No If yes, how much Casing height above or below land surface in.   |   |   |                                |                         |                      |  |  |  |  |  |
| 6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other  |   |   |                                |                         |                      |  |  |  |  |  |
|  |   |   |                                |                         |                      |  |  |  |  |  |
| 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 16 Other (specify below)  |   |   |                                |                         |                      |  |  |  |  |  |
|  | 2 Sewer lines 7 Pit pri<br>3 Watertight sewer lines 8 Sewag   |   | er storage                     |                         |                      |  |  |  |  |  |
|  | 4 Lateral lines 9 Feedy   | ard 14 Abando                                     | ned water well Direction       | on from well? らんいす      | <i>-h</i>            |  |  |  |  |  |
|  | 5 Cess pool 10 Livest   | ock pens 15 Oil wel                               | l/Gas well — How m             | nany feet? 30           |                      |  |  |  |  |  |
|  |   | INGMATERIALS                                      | FROM TO                        | PLUGGING MA             | TERIALS              |  |  |  |  |  |
|  |   | ntinite   |                                |                         |                      |  |  |  |  |  |
|  | in   i   i  | ment  |                                |                         |                      |  |  |  |  |  |
|  |   |   |                                |                         |                      |  |  |  |  |  |
|  |   |   |                                |                         |                      |  |  |  |  |  |
|  |   |   |                                |                         |                      |  |  |  |  |  |
| -  | CONTRACTOR'S OR LANDOWN   | EDIS CEDTIFICATIO                                 | Ni. This water well was        | w plugged under my it   | wiediction and was   |  |  |  |  |  |
| 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 This Water Well Record was completed on (mo/day/year) 1 - 29 - 10 under the business name of by (signature)   |   |   |                                |                         |                      |  |  |  |  |  |
| INSTRUCTIONS: Use typewriter or ballpoint pen. Please press firmly and print clearly. Please fill in blanks, underline or circle the   |   |   |                                |                         |                      |  |  |  |  |  |
| cor  | rect answers. Send top three copies to  | Kansas Department of He                           | alth and Environment, Bu       | reau of Water, Geology  | Section, 1000 SW     |  |  |  |  |  |
|  | kson St., Ste. 420, Topeka, Kansas 666<br>ords. Visit us at http://www.kdheks.go                                |   | 5/296-5522. Send one to V      | Water Well Owner and re | etain one for your   |  |  |  |  |  |
| 1  |   | e   |                                |                         |                      |  |  |  |  |  |