

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

(to rectify lacking or incorrect information)

County: Johnson

Location listed as:

Section-Township-Range: 20-13S-20EFraction ($\frac{1}{4}$ $\frac{1}{4}$ $\frac{1}{4}$): _____

Location changed to:

20-13S-22ESW NW

Other changes: Initial statements: _____

Changed to: _____

Comments: _____

verification method: Followed drillers directions from Be Soto on JohnsonCo. mapinitials: S.P. date: 7/16/2004

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: <u>Johnson</u>	<u>SW 1/4</u>	<u>20</u>	<u>13S</u>	<u>20E</u> E/W																					
Distance and direction from nearest town or city street address of well if located within city? <u>2 miles South Desota KS</u>																										
2	WATER WELL OWNER: <u>Army Operations Support Command</u> <u>Shuflower Army Ammunition Plant</u> RR #, St. Address, Box #: <u>PO Box 640 Desota, KS 66018</u> City, State, ZIP Code: <u>Desota, KS 66018</u> Board of Agriculture, Division of Water Resources Application Number:																									
3	MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF WELL <u>12</u> ft.																							
N W E SW SE S		WELL'S STATIC WATER LEVEL 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 <u>X</u> If yes, mo/day/yr sample was submitted																								
Water Well Disinfected: Yes No <u>X</u>																										
5	TYPE OF BLANK CASING USED:																									
1 Steel 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (Specify below) <u>2</u> PVC 4 ABS 6 Asbestos-Cement 8 Concrete Tile																										
Blank casing diameter <u>2</u> in. Was casing pulled? Yes <u>X</u> No If yes, how much																										
Casing height above or below land surface <u>2</u> in.																										
6	GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout <u>3</u> 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 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? How many feet?																										
<table border="1" style="width:100%"><thead><tr><th style="width:10%">FROM</th><th style="width:10%">TO</th><th style="width:80%">PLUGGING MATERIALS</th></tr></thead><tbody><tr><td><u>0</u></td><td><u>12</u></td><td><u>Bentonite Chips</u></td></tr><tr><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td></tr></tbody></table>						FROM	TO	PLUGGING MATERIALS	<u>0</u>	<u>12</u>	<u>Bentonite Chips</u>															
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7	CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) <u>6/23/03</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>704</u> This Water Well Record was completed on (mo/day/year) under the business name of <u>MAYES</u> by (signature) <u>David Mayes</u>																									
INSTRUCTIONS: Use typewriter or ball point pen. Please <u>press firmly</u> and <u>print</u> 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.																										