County: Lyon Fraction NENW Sec. 14 T 16 S R // (E)	W
CORRECTION(S) TO WATER WELL COMPLETION RECORD (WWC-5)  (to rectify lacking or incorrect information)	
Owner: Jacque Scott	
Location was listed as: Location changed to:	
Section-Township-Range: $14-165-3$ $= 14-165-1/5$ Fraction ( $\frac{1}{4}$ $\frac{1}{4}$ ): $14-165-1/5$ 14-165-1/5 14-165-1/5	
Fraction (1/4 1/4 1/4): NENW SW NENW SW	
Other changes: Initial statements:	
Changed to:	
Comments:	
Verification method: Wellsite address, city street map, and mapping tool & aerial photos on KGS website initials: DRA date: 10/30/20,	<u>d</u>
mapping tool & aerial photos on KGS website	1
	13
Submitted by. Railsas Geological Survey, Data Resources Library, 1930 Constant Ave., Lawrence, RS 60047-3726	
to: Kansas Dept of Health & Environment, Bureau of Water, 1000 SW Jackson, Suite 420, Topeka, KS 66612-1367.	

WATER W	ELL PLUG	GING RECORD	Form WWC-5P	KSA 82	a-1212	ID NO.			
		ATER WELL:	Fraction		tion Number		p Number	Range Number	
County:	Lyon		NE 4 NW 4 SV n or city street address	W 1/4	14	in city?	6S	3E	
			n or city street address	s of Mell II	TOGAICU WITH	iii Oity!			
229 E. 8	8th St, Allen,	KS							
2 WATER WELL OWNER: Jacque Scott Global Positioning System (decimal degrees, min. of 4 digits)									
		- "	Latitude: NA						
RR#,	St. Address,	Box #: 319 E Irv	win \		gitude: NA vation: NA			<del>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</del>	
Ci	tv State ZII	Code: Iola, KS							
Cı	uj, viiiv, eili	2000, 2010, 200	Data Collection Method: NA						
	WELL'S L		4 DEPTH OF WE	LL <u>13.50</u>		ft. M	W2		
	AN "X" IN S	SECTION	TYPE I SO OF APPIC	WELL'S STATIC WATER LEVEL NA ft.					
BOX:			WELL'S STATIC WATER LEVEL NA ft.						
N WELL WAS USED AS:									
		1	11,222,1110,001						
NW NE 1 Domestic 5 Public Water Supply 9 Dewatering 6 Oil Field Water Supply 10 Monitoring 7 Domestic (Lawn & Garden) 11 Injection Well									
									VV
	-sw-	- SE —	4 Industrial	jo Alf C	andunoning	1,1	2 Outor		
	S		Was a chemical	/bacteriolo	gical sample	submitted to	Department	? Yes No <u>X</u> _	
	3								
5 TYPE O		CASING USED:				) O.1 (	· C · I · I · I		
1 Steel	3 RMI		. 0	berglass		Other (spec	ary below)		
(2)PVC	4 ABS	6 Asbe	estos-Cement 8 C	oncrete Ti					
Blank ca	sing diamete	r <b>2</b> in Was	casing pulled? Yes	x No	If yes, how	much 3ft			
Casing h	eight above o	or below land surfa	ce NA in		<u> </u>				
6 GROUT	PLUG MA	TERIAL: 1 Nea	t cement 2 Cemen	t grout	(3)Bentonite	e 4 Other	Soil: 0-31	<u>tt</u>	
~:		D : 4	0 4 12 5 0	Trace	f+ +-	ъ т	rom	ft. to ft.	
Grout Plu	ig intervals:	From 3	ft. to 13.5 ft.,	rrom	ft. to	и., г	10111	ii. w II.	
What is th	he nearest so	urce of possible co	ntamination:						
1 Septic	tank	6 Seepage p	it 11 Fuel st			er (specify be	elow)		
2 Sewer	lines	7 Pit privy		_					
3 Watert 4 Lateral	ight sewer li		goon 13 Insecti	cide storag loned wate		ection from v	vell?		
4 Lateral 5 Cess p		9 Feedyard 10 Livestock		ell/Gas wel		v many feet?			
J Cess p	001	10 Divosioni				•			
FROM	TO	PLUGGING	MATERIALS	FROM	ТО	PL	UGGING M	ATERIALS	
0	3		oil						
3	13.50	Bent	tonite						
								<u></u>	
7 CONTR	ACTOR'S	OR LANDOWNE	R'S CERTIFICATI	ON: This	water well w	as plugged u	ınder my jur	isdiction and was	
completed	on (mo/day/ː	year)9/9/	13 and this r	ecord is tr	ue to the best	oi my know	neage and be	mer. Kansas water	
			7 . This Water		ord was comp	pleted on (m	o/day(year)_	<u>9/23/13</u> under t	
	me of		ssociates, Inc.						
INSTRUC	TIONS: Ple	ease fill in blanks o	or circle the correct an	swers. Ser	nd top three c	opids to Han	isas Departin	ent of Health and	
Terrinonno	est Distroom of	FWInter Genlamy	Section 1000 SW Jack	cson St - St	e 420 Lone	Ka. Kyannsmus c	10012-1307.	i elephone.	
785/296-55	322. Send or	e to Water Well O	wner and retain one for	or your rec	orus. Visit u	s at milk X	ww.kuneks.g	o vi water well.	