

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

Location listed as:

Section-Township-Range: _____

Fraction ($\frac{1}{4}$ $\frac{1}{4}$ $\frac{1}{4}$): _____

County: Marion

Location ~~changed to~~:

2-175-3E

NE SE SE

Other changes: Initial statements: Dickinson County

Changed to: Marion County

Comments: _____

verification method: written & legal descriptions, city map on internet,
and Ramona 1:24,000 topo. map.

initials: DPL date: 11/24/2003

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>DICKINSON</u>	<u>NE 1/4 SE 1/4 SE 1/4</u>	<u>2</u>		<u>17S</u>		<u>3</u>	<u>EW</u>

Distance and direction from nearest town or city street address of well if located within city?
Approximately 50' South of 212 S. D Street, Ramona, KS

2 WATER WELL OWNER: City of Ramona PMW-9
KDHE-BER
 RR #, St. Address, Box #: 1000 SW Jackson, Suite 410 Board of Agriculture, Division of Water Resources
 City, State, ZIP Code: Topeka, KS 66612-1367 Application Number:

3	MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4	DEPTH OF WELL <u>45</u> ft.
		WELL'S STATIC WATER LEVEL <u>37.48</u> ft. WELL WAS USED AS: 1 Domestic 5 Public Water Supply 9 Dewatering 2 Irrigation 6 Oil Field Water Supply 10 <u>Monitoring Well</u> 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 in. Was casing pulled? Yes No X 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 45 ft. to 42 ft., From ft. to ft., From to ft.

What is the nearest source of possible contamination:

1 Septic tank	6 Seepage pit	<u>11</u> 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? SW How many feet? ~220'

FROM	TO	PLUGGING MATERIALS
45	42	
45	3	Bentonite
3	0	Native soil and concrete surface

7 CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 12/17/02 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 014 This Water Well Record was completed on (mo/day/year) 1/23/03 under the business name of MAXIM TECHNOLOGIES by (signature) William Steff

INSTRUCTIONS: Use typewriter or ball point 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.