

County: Marion Fraction: W $\frac{1}{2}$ E $\frac{1}{2}$, NW, SE, SW Sec. 8 T. 19 S R. 1 EW

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

Owner: Marvin Goering

~~1875~~ APPROX 2005 FT NE of
Alamo Rd & 230th St,

If location corrected, was listed as:
Section-Township-Range: 8-19S-1E

Location changed to:
8-19S-1E
W $\frac{1}{2}$, E $\frac{1}{2}$, NW $\frac{1}{4}$, SE $\frac{1}{4}$, SW $\frac{1}{4}$

Fraction (1/4 calls): none given

Other changes: Initial statements: no date of well plugging provided

Changed to: approximately 3/1/17

Comments: _____

Verification method: Went over well location description with well/land owner
while looking at air photo on KDIHE STR Finder & air
photo on Google Earth. Initials: PKC Date: 4/4/17

Submitted by: Kansas Geological Survey, Data Resources Library, 1930 Constant Ave., Lawrence, KS 66047-3726
 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.

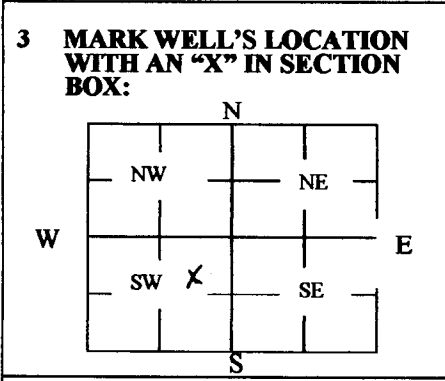
1 LOCATION OF WATER WELL: Fraction $\frac{1}{4}$ $\frac{1}{4}$ $\frac{1}{4}$ $\frac{1}{4}$ Section Number 9 Township Number T 19 S Range Number 1 E W
 County: Marion

Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here From Alamo + 230th St. NE approx 2000 FT

Global Positioning Systems (GPS) information:
 Latitude: _____ (in decimal degrees)
 Longitude: _____ (in decimal degrees)
 Elevation: _____
 Datum: WGS84, NAD83, NAD27
 Collection Method: _____

2 WATER WELL OWNER: Marvin J. Boering
 RR#, St. Address, Box #: 1870 Maccasium Rd
 City, State ZIP Code: Wagon Wheel, KS 67860

GPS unit (Make/Model: _____)
 Digital Map/Photo, Topographic Map, Land Survey
 Est. Accuracy: < 3 m, 3-5 m, 5-15 m, > 15 m



4 DEPTH OF WELL 15 ft.
 WELL'S STATIC WATER LEVEL 5 FT From ft
 WELL WAS USED AS:
 Domestic Public Water Supply Dewatering
 Irrigation Oil Field Water Supply Monitoring
 Feedlot Domestic (Lawn & Garden) Injection Well
 Industrial Air Conditioning Other Water For Posture
 Was a chemical/bacteriological sample submitted to Department? Yes No
Water well was abandoned approx 10 years ago
2 gallon chlorine was put in to well before plugging

5 TYPE OF BLANK CASING USED:
 Steel RMP (SR) Wrought Fiberglass Other (Specify below)
 PVC ABS Asbestos-Cement Concrete Tile
 Blank casing diameter 3/4" in. Was casing pulled? Yes No If yes, how much _____
 Casing height above or below land surface _____ in.
Casing height is approx 12" below grade level

6 GROUT PLUG MATERIAL: Neat cement Cement grout Bentonite Other _____
 Grout Plug Intervals: From 5 ft. to 4'6" ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.

What is the nearest source of possible contamination:
 Septic tank Seepage pit Fuel storage Other (specify below)
 Sewer lines Pit privy Fertilizer storage
 Watertight sewer lines Sewage lagoon Insecticide storage
 Lateral lines Feedyard Abandoned water well Direction from well? NE
 Cess pool Livestock pens Oil well/Gas well How many feet? Approx 2,000 FE

Gas well is shut down

FROM	TO	PLUGGING MATERIALS	FROM	TO	PLUGGING MATERIALS
15'	5'	Sand			
5'	4'6"	Concrete			
4'6"	0	Top soil			

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) _____ under the business name of _____ by (signature) Marvin J. Boering owner

Send one white copy to Kansas Department of Health & Environment, Geology Section, 1000 SW Jackson Street, Ste. 420, Topeka, KS 66612-1367. Send one copy to WATER WELL OWNER and retain one for your records.
 Visit us at <http://www.kdheks.gov/waterwell/index.html> Telephone 785-296-5524.