

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

County: Marion

Location listed as:

Section-Township-Range: None Given

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

Location changed to:

7-215-5E

NW SE NW

Other changes: Initial statements: \_\_\_\_\_

Changed to: \_\_\_\_\_

Comments: \_\_\_\_\_

verification method: Written description, city street map, and mapping tool on KGS website.

initials: DRD date: 10/21/2008

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: <b>511 MAIN FLORENCE</b>	Fraction ¼    ¼    ¼	Section Number	Township Number	Range Number
County: <b>MARION CO, KS</b>		E/W			

Distance and direction from nearest town or city street address of well if located within city?

2	WATER WELL OWNER: <b>CITY OF FLORENCE</b>	Board of Agriculture, Division of Water Resources
RR #, St. Address, Box #: <b>511 MAIN FLORENCE, KS 66851</b>		Application Number:

<p>3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:</p> <div style="text-align:center;"> </div>	<p>4 DEPTH OF WELL <b>35</b> ft.</p> <p>WELL'S STATIC WATER LEVEL <b>21</b> ft.</p> <p>WELL WAS USED AS:</p> <table style="width:100%;"> <tr> <td><input checked="" type="radio"/> Domestic</td> <td>5 Public Water Supply</td> <td>9 Dewatering</td> </tr> <tr> <td>2 Irrigation</td> <td>6 Oil Field Water Supply</td> <td>10 Monitoring Well</td> </tr> <tr> <td>3 Feedlot</td> <td>7 Domestic (Lawn &amp; Garden)</td> <td>11 Injection Well</td> </tr> <tr> <td>4 Industrial</td> <td>8 Air Conditioning</td> <td>12 Other .....</td> </tr> </table> <p>Was a chemical / bacteriological sample submitted to Department? Yes ..... No <input checked="" type="checkbox"/> .....</p> <p>If yes, mo/day/yr sample was submitted .....</p> <p>Water Well Disinfected: Yes <input checked="" type="checkbox"/> ..... No .....</p>	<input checked="" type="radio"/> 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 .....
<input checked="" type="radio"/> 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 .....											

5 TYPE OF BLANK CASING USED:

1 Steel	3 RMP (SR)	5 Wrought	7 Fiberglass	<input checked="" type="radio"/> Other (Specify below) <b>hand dug</b>
2 PVC	4 ABS	6 Asbestos-Cement	8 Concrete Tile	

Blank casing diameter ..... in.      Was casing 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     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? .....

FROM	TO	PLUGGING MATERIALS
<b>35 FT.</b>	<b>21 FT.</b>	<b>well sand</b>
<b>21 FT.</b>	<b>5 FT.</b>	<b>Clay</b>
<b>5 FT.</b>	<b>4 FT.</b>	<b>Bentonite</b>
<b>4 FT.</b>	<b>0 FT.</b>	<b>Black dirt</b>

7 CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) **10-02-08** 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) **[Signature]**

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.