

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

(to rectify lacking or incorrect information)

County: Harvey

Location listed as:

Location changed to:

Section-Township-Range: 24-23-1E

24-23S-1W

Fraction (  $\frac{1}{4}$   $\frac{1}{4}$   $\frac{1}{4}$ ): NE NW NE

NE NW NE

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

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

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

verification method: Well address, city map on internet, and

Newton & Zimmerdale 1:24,000 topo. maps

initials: DR date: 4/11/2005

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: County: <u>Harvey</u>	Fraction <u>NE 1/4 NW 1/4 NE 1/4</u>	Section Number <u>24</u>	Township Number <u>23</u>	Range Number <u>1 E</u>																											
Distance and direction from nearest town or city street address of well if located within city? <u>101 S Evans</u>																															
2 WATER WELL OWNER: <u>E3 H Foam Dist</u>																															
RR#, St. Address, Box #: <u>101 S Evans</u>		Board of Agriculture, Division of Water Resources																													
City, State, ZIP Code: <u>Newton, KS</u>		Application Number:																													
3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX: N <table border="1" style="width:100%; height: 100px; text-align: center; border-collapse: collapse;"><tr><td colspan="2">N W</td><td colspan="2">N E</td></tr><tr><td colspan="2">S W</td><td colspan="2">S E</td></tr></table> S		N W		N E		S W		S E		4 DEPTH OF WELL..... <u>25</u> .....ft.																					
		N W		N E																											
S W		S E																													
WELL'S STATIC WATER LEVEL..... <u>14.23</u> .....ft.																															
		WELL WAS USED AS: <div style="display: flex; justify-content: space-between;"> <div> 1 Domestic 2 Irrigation 3 Feedlot 4 Industrial </div> <div> 5 Public Water Supply 6 Oil Field Water Supply 7 Lawn and Garden Only 8 Air Conditioning </div> <div> 9 Dewatering 10 Monitoring Well 11 Injection Well 12 Other..... </div> </div>																													
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: <div style="display: flex; justify-content: space-between;"> <div> 1 Steel 2 PVC </div> <div> 3 RMP (SR) 4 ABS </div> <div> 5 Wrought 6 Asbestos-Cement </div> <div> 7 Fiberglass 8 Concrete Tile </div> <div> 9 Other (specify below) <u>overdrilled</u> </div> </div>																															
Blank casing diameter... <u>2</u> .....in.      Was casing pulled? Yes <u>X</u> No..... If yes, how much <u>20'</u> ..... Casing height above or below land surface.....in.																															
6 GROUT PLUG MATERIAL: 1 Neat cement    2 Cement grout    3 <u>Bentonite</u> 4 Other.....																															
Grout Plug Intervals:    From... <u>20</u> ...ft. to... <u>3</u> ...ft., From.....ft. to .....ft., From..... to.....ft.																															
What is the nearest source of possible contamination: <div style="display: flex; justify-content: space-between;"> <div> 1 Septic tank 2 Sewer lines 3 Watertight sewer lines 4 Lateral lines 5 Cess Pool </div> <div> 6 Seepage pit 7 Pit privy 8 Sewage lagoon 9 Feedyard 10 Livestock pens </div> <div> 11 Fuel storage 12 Fertilizer storage 13 Insecticide storage 14 Abandoned water well 15 Oil well/Gas well </div> <div> 16 Other (specify below) <u>contaminated site</u> </div> </div>																															
Direction from well? .....      How many feet? .....																															
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7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) <u>4/24/00</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>585</u> This Water Well Record was completed on (mo/day/year) <u>4/27</u> under the business name of <u>Asl</u> by (signature) <u>At Juncen F. DD</u>																															

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, Topeka, Kansas 66620-0001. Telephone: 785/296-3565. Send one to Water Well Owner and retain one for your records.