

CORRECTION TO WATER WELL RECORD (WWC-5)

The following correction(s) was made to the attached WWC-5 log in order to rectify lacking or incorrect information.

Fraction (1/4 1/4 1/4) Section-Township-Range changed:

listed as NE NE NE

changed to SE NE NW, 17-23S-1E

Other changes: Initial statements: _____

Changed to: _____

Comments: _____

verification method: Well owner's address, city map on internet,
and Newton 1:24,000 topo. map.

initials: ORL date: 11/6/2002

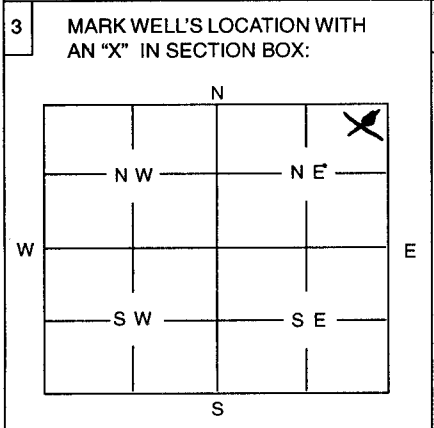
submitted by: Kansas Geological Survey, Data Resources Library, 1930 Constant Ave., Lawrence, KS 66047-3726
to: Kansas Dept of Health & Environment Bureau of Water Industrial Programs, Bldg 283, Forbes Field, KS 66620

1 LOCATION OF WATER WELL:	Fraction	Section	Number	Township	Number	Range	Number
County: HARUKY	NE 1/4 NE 1/4 NW 1/4						

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

2 WATER WELL OWNER: **SHOWALTER FOUNDATION**
 RR #, St. Address, Box #: **900 N. Poplar**
 City, State, ZIP Code : **Newton KS 67114**

Board of Agriculture, Division of Water Resources
Application Number:



4 DEPTH OF WELL **110** ft
 WELL'S STATIC WATER LEVEL **21** ft

WELL WAS USED AS:

1 Domestic	5 Public Water Supply	9 Dewatering
2 Irrigation	6 Oil Field Water Supply	10 Monitoring Well
<u>3 Feedlot</u>	7 Domestic (Lawn & Garden)	11 Injection Well
4 Industrial	8 Air Conditioning	12 Other

Was a chemical / bacteriological sample submitted to Department? Yes No
 If yes, mo/day/yr sample was submitted

Water Well Disinfected: Yes No

5 TYPE OF BLANK CASING USED:

1 Steel	3 RMP (SR)	5 Wrought	7 Fiberglass	9 Other (Specify below)
2 PVC	4 ABS	6 Asbestos-Cement	8 Concrete Tile	

Blank casing diameter **16** in. Was casing pulled? Yes No **X** If yes, how much

Casing height above or below land surface **48** in.

6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other

Grout Plug Intervals: From **4** ft. to **25** 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? **None within 1/4 mile** How many feet?

FROM	TO	PLUGGING MATERIALS
4	25	CONCRETE
25	110	SAND
0	4	Top Soil

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) **10-13-02** and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **138** This Water Well Record was completed on (mo/day/year) **10-16-02** under the business name of **PETERSON IRRIGATION** by (signature) **Mike Peterson**

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.