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

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.

			WATER WELL PLUGGING F	RECORD Form WWC-5P	KSA 82a-1212 ID	NO	
1 LOCA	TION OF WAT	ER WELL:	Fraction	Section Number	Township Number	Range Number	
County: A	llen		WEySW 1/4 NW4	2	25 5	19	
	direction from	nearest town or o	city street address of well if loo	cated within city?		11 CEN	
2 m	le Lei	thon.	54 and 18	4 mile Sou	4 of lai	harpe, ke	
2 WATER WELL OWNER: Allen County Landfill							
RR #, S		ox #: 1/79	2800 Sr	Board of Agriculture	e, Division of Water Resou r:	irces	
	WELL'S LOC	ATION WITH	d DEPTH OF WELL 54.5 ft. NW 8 m				
	Ņ		WELL'S STATIC WATE	ER LEVEL ft.			
			WELL WAS USED AS	:			
NV	vv	NE	1 Domestic	5 Public Water Supply			
			2 Irrigation 3 Feedlot	6 Oil Field Water Supp 7 Domestic (Lawn & G			
W		E	4 Industrial	8 Air Conditioning			
Was a chemical / bacteriological sample submitted to Department? Yes							
SW SE If yes, mo/day/yr sample was submitted							
	s		Water Well Disinfected: Y	es NoX			
5 TYPE OF BLANK CASING USED:							
1 Steel 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (Specify below) 8 Concrete Tile							
Blank Casin	casing diamet g height above	erin. or below land su	Was casing pulled?	Yes No	If yes, how m	uch 3 4 5	
6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other							
Grout Plug Intervals: From							
What is the nearest source of possible contamination:							
	eptic tank ewer lines		6 Seepage pit7 Pit privy	11 Fuel storage12 Fertilizer storage	16 Other (sp	ecify.belgw)	
Watertight sewer lines Lateral lines			8 Sewage lagoon 13 Insecticide storage 9 Feedyard 14 Abandoned water well				
1	ess pool		10 Livestock pens	15 Oil well/Gas well	weii		
Direction from well? How many feet?							
FROM TO PLUGGING MATERIALS							
	((UGGING MATERIALS				
0	57,3	Benton	4				
					_		
			Griginal Returned to Sender				
					for Correction Date: 12-7-10		
7 CONT	DA0705:0	DE LANDA	DIO OFFICIONES STATES				
(mo/day/year)							
	nature)	ander the	/	(4.6.)			
INSTRUCTI	ONS: Use tv	pewriter or ball	point pen. <u>Please press fir</u>				
answers. Se	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.							