

# CORRECTION TO WATER WELL RECORD (WWC-5)

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

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

listed as 31-265-1E

changed to NE SW SE, 31-265-1E

Other changes: Initial statements: No county

Changed to: Sedgwick County

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

verification method: well address on form, Wichita city map, and  
Wichita East 1:24,000 topo. map. initials: DR date: 12/6/99

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: County:	Fraction 1/4    1/4    1/4	Section Number <b>31</b>	Township Number <b>26 S</b>	Range Number <b>1 E</b>
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Distance and direction from nearest town or city street address of well if located within city?  
**3050 N. Coolidge**

2 WATER WELL OWNER: <b>Deborah Winegarner</b> RR#, St. Address, Box #: <b>3050 N. Coolidge</b> City, State, ZIP Code : <b>Wichita, Ks. 67204</b>	Board of Agriculture, Division of Water Resources Application Number:
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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></td><td></td><td><b>X</b></td><td></td></tr> <tr><td>N</td><td>W</td><td></td><td>N</td><td>E</td></tr> <tr><td>W</td><td></td><td></td><td></td><td>E</td></tr> <tr><td></td><td>S</td><td>W</td><td></td><td>S</td><td>E</td></tr> <tr><td></td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td></td><td></td><td></td><td></td><td></td><td></td></tr> </table> S			<b>X</b>		N	W		N	E	W				E		S	W		S	E													4 DEPTH OF WELL..... <b>28</b> .....ft. WELL'S STATIC WATER LEVEL..... <b>14</b> .....ft. WELL WAS USED AS: <div style="display: flex; justify-content: space-between;"> <div> 1 Domestic  <b>2 Irrigation</b>  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> <p>Was a chemical/bacteriological sample submitted to Department? Yes....No.... If yes, mo/day/yr sample was submitted.....</p> <p>Water Well Disinfected: Yes <b>X</b>.. No.....</p>
		<b>X</b>																															
N	W		N	E																													
W				E																													
	S	W		S	E																												

5 TYPE OF BLANK CASING USED: <div style="display: flex; justify-content: space-between;"> <div> 1 Steel  <b>2 PVC</b> </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) </div> </div> <p>Blank casing diameter. <b>5</b>.....in.    Was casing pulled? Yes..... No <b>X</b>.. If yes, how much..... Casing height above or below land surface. <b>3 Ft. Below</b>.....in.</p>	6 GROUT PLUG MATERIAL: <b>1 Neat cement</b> 2 Cement grout    3 Bentonite    4 Other..... Grout Plug Intervals:    From <b>28</b> ft. to <b>3</b> 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> <b>16 Other (specify below)</b>  <b>Termite treatment</b> </div> </div> <p>Direction from well? <b>South</b>.....    How many feet? <b>2</b>.....</p>
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FROM	TO	PLUGGING MATERIALS
<b>28</b>	<b>3</b>	<b>Cement</b>
<b>3</b>	<b>0</b>	<b>Compacted soil</b>

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) .....
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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.