

# 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 SW SW NW, 8-27-1

changed to NW SW NW, 8-27S-1E

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

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

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

verification method: Well owner's address, legal description, city map on internet,  
and Wichita East 1:24,000 topo map. initials: DRF date: 9/20/2001

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

<b>1 LOCATION OF WATER WELL:</b> County: <u>Sedgwick</u>	Fraction <u>SW 1/4 SW 1/4 NW 1/4</u>	Section Number <u>8</u>	Township Number <u>27</u>	Range Number <u>1</u>
---	--------------------------------------	-------------------------	---------------------------	-----------------------

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

---

<b>2 WATER WELL OWNER:</b> <u>Barbara Patterson -</u> RR#, St. Address, Box #: <u>1417 W 19th St.</u> City, State, ZIP Code : <u>Wichita, Ks. 67203</u>	Board of Agriculture, Division of Water Resources Application Number:
---	--

---

<b>3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:</b> <div style="text-align: center;">N</div> <table border="1" style="width:100%; height: 100px; border-collapse: collapse;"> <tr> <td style="width:33%; text-align: center;">N W</td> <td style="width:33%; text-align: center;">N E</td> <td style="width:33%;"></td> </tr> <tr> <td style="text-align: center;">W</td> <td></td> <td style="text-align: center;">E</td> </tr> <tr> <td style="text-align: center;">S W</td> <td style="text-align: center;">S E</td> <td></td> </tr> <tr> <td colspan="3" style="text-align: center;">S</td> </tr> </table>	N W	N E		W		E	S W	S E		S			<b>4 DEPTH OF WELL</b> <u>pipe</u> ..... <u>12</u> ft. WELL'S STATIC WATER LEVEL ..... <u>0</u> ft. WELL WAS USED AS: <table style="width:100%;"> <tr> <td>1 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 Lawn and Garden Only</td> <td>11 Injection Well</td> </tr> <tr> <td>4 Industrial</td> <td>8 Air Conditioning</td> <td><u>12 Other abandoned</u></td> </tr> </table> <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..... No.....</p>	1 Domestic	5 Public Water Supply	9 Dewatering	2 Irrigation	6 Oil Field Water Supply	10 Monitoring Well	3 Feedlot	7 Lawn and Garden Only	11 Injection Well	4 Industrial	8 Air Conditioning	<u>12 Other abandoned</u>
N W	N E																								
W		E																							
S W	S E																								
S																									
1 Domestic	5 Public Water Supply	9 Dewatering																							
2 Irrigation	6 Oil Field Water Supply	10 Monitoring Well																							
3 Feedlot	7 Lawn and Garden Only	11 Injection Well																							
4 Industrial	8 Air Conditioning	<u>12 Other abandoned</u>																							

---

**5 TYPE OF BLANK CASING USED:**

<input checked="" type="checkbox"/> 1 Steel	<input type="checkbox"/> 3 RMP (SR)	<input type="checkbox"/> 5 Wrought	<input type="checkbox"/> 7 Fiberglass	<input type="checkbox"/> 9 Other (specify below)
<input type="checkbox"/> 2 PVC	<input type="checkbox"/> 4 ABS	<input type="checkbox"/> 6 Asbestos-Cement	<input type="checkbox"/> 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 Heat cement    ☐ 2 Cement grout    ☐ 3 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:

<input type="checkbox"/> 1 Septic tank	<input type="checkbox"/> 6 Seepage pit	<input type="checkbox"/> 11 Fuel storage	<input type="checkbox"/> 16 Other (specify below)
<input checked="" type="checkbox"/> 2 Sewer lines	<input type="checkbox"/> 7 Pit privy	<input type="checkbox"/> 12 Fertilizer storage	
<input type="checkbox"/> 3 Watertight sewer lines	<input type="checkbox"/> 8 Sewage lagoon	<input type="checkbox"/> 13 Insecticide storage	
<input type="checkbox"/> 4 Lateral lines	<input type="checkbox"/> 9 Feedyard	<input type="checkbox"/> 14 Abandoned water well	
<input type="checkbox"/> 5 Cess Pool	<input type="checkbox"/> 10 Livestock pens	<input type="checkbox"/> 15 Oil well/Gas well	

Direction from well? South..... How many feet? 60.....

---

FROM	TO	PLUGGING MATERIALS
18	3	Cement
3	0	dirt

---

**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) Barbara J. Patterson

---

**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: 913/296-3565. Send one to Water Well Owner and retain one for your records.