

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

Location listed as:

Section-Township-Range: None Given

Fraction ($\frac{1}{4}$ $\frac{1}{4}$ $\frac{1}{4}$): _____

County: Sedgwick
Location changed to:

5-275-1E

NE NW

Other changes: Initial statements: _____

Changed to: _____

Comments: _____

verification method: Well address, city street map, and
Wichita East 1:24,000 topo. map.

initials: DRL date: 10/2/2007

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:	Fraction <div style="display: flex; justify-content: space-around;">1/41/41/4</div>	Section Number	Township Number	Range Number
County: <u>Sedgewick</u>		E/W			

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

2810 MASCOT WICHITA 67204

2	WATER WELL OWNER: <u>2810 MASCOT WICHITA KS</u>	Board of Agriculture, Division of Water Resources Application Number: _____
RR #, St. Address, Box #: _____ City, State, ZIP Code: _____		

3	<div style="display: flex;"> <div style="flex: 1;"> MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX: <div style="text-align: center;"> N <table border="1" style="width: 100%; height: 100px; border-collapse: collapse;"> <tr><td style="text-align: center;">NW</td><td style="text-align: center;">NE</td></tr> <tr><td style="text-align: center;">SW</td><td style="text-align: center;">SE</td></tr> </table> S </div> </div> <div style="flex: 2;"> 4 DEPTH OF WELL <u>20</u> ft. WELL'S STATIC WATER LEVEL <u>15</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 Domestic (Lawn & Garden) <u>7</u> 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> </div> </div>	NW	NE	SW	SE
NW	NE				
SW	SE				

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>GALVANIZED 1 1/2"</u> </div> </div>			
Blank casing diameter _____ in. Was casing pulled? <u>Yes</u> No _____ If yes, how much _____ Casing height above or below land surface _____ in.			

6	GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other _____		
Grout Plug Intervals: From _____ ft. to _____ ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.			
What is the nearest source of possible contamination: <div style="display: flex; justify-content: space-between;"> <div> 1 Septic tank <u>2 Sewer lines</u> 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 <u>NONE</u> 15 Oil well/Gas well </div> <div> 16 Other (specify below) _____ </div> </div> Direction from well? _____ How many feet? <u>100'</u>			

FROM	TO	PLUGGING MATERIALS
<u>50'</u>	<u>15'</u>	<u>SAND GRAVEL</u>
		<u>BACK FILLED WITH</u>
<u>15'</u>	<u>0'</u>	<u>DIRT 3'</u>

7	CONTRACTOR'S OF 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) <u>Ronald J. Jorde</u>		
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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, 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.