

County: Sedgwick Fraction NE NE SW NW Sec. 35 T 27 S R 1 (E)W

CORRECTION(S) TO WATER WELL COMPLETION RECORD (WWC-5)

(to rectify lacking or incorrect information)

Owner: Cale Clough

Location was listed as:

Section-Township-Range: 35-27S-1E

Fraction ($\frac{1}{4}$ $\frac{1}{4}$ $\frac{1}{4}$): None Given

Location changed to:

35-27S-1E

NE NE SW NW

Other changes: Initial statements: _____

Changed to: _____

Comments: _____

Verification method: Well site address, city street map, and mapping tool on KGS website.

initials: WRA date: 11/20/2014

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 RECORD Form WWC-5P

KSA 82a-1212

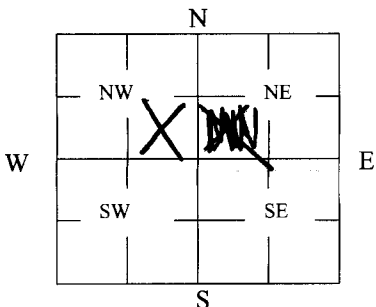
ID NO.

1 LOCATION OF WATER WELL: County: <u>Sedgwick</u>	Fraction $\frac{1}{4}$ $\frac{1}{4}$ $\frac{1}{4}$	Section Number <u>35</u>	Township Number <u>27S</u>	Range Number <u>1</u> <u>EW</u>
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Distance and direction from nearest town or city street address of well if located within city?

3522 E. Funston Wichita, KS 67218

2 WATER WELL OWNER: <u>Cale Clough</u> RR#, St. Address, Box #: <u>3522 E Funston</u> City, State ZIP Code: <u>Wichita, KS 67218</u>	Global Positioning Systems (decimal degrees, min. of 4 digits) Latitude: _____ Longitude: _____ Elevation: _____ Datum: _____ Data Collection Method: _____
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3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX: 	4 DEPTH OF WELL <u>54</u> ft. WELL'S STATIC WATER LEVEL <u>40</u> ft. WELL WAS USED AS: <table border="0"> <tr> <td><input checked="" type="radio"/> 1 Domestic</td> <td>5 Public Water Supply</td> <td>9 Dewatering</td> </tr> <tr> <td><input type="radio"/> 2 Irrigation</td> <td>6 Oil Field Water Supply</td> <td>10 Monitoring</td> </tr> <tr> <td><input type="radio"/> 3 Feedlot</td> <td>7 Domestic (Lawn & Garden)</td> <td>11 Injection Well</td> </tr> <tr> <td><input type="radio"/> 4 Industrial</td> <td>8 Air Conditioning</td> <td>12 Other _____</td> </tr> </table> Was a chemical/bacteriological sample submitted to Department? Yes _____ No <input checked="" type="checkbox"/>	<input checked="" type="radio"/> 1 Domestic	5 Public Water Supply	9 Dewatering	<input type="radio"/> 2 Irrigation	6 Oil Field Water Supply	10 Monitoring	<input type="radio"/> 3 Feedlot	7 Domestic (Lawn & Garden)	11 Injection Well	<input type="radio"/> 4 Industrial	8 Air Conditioning	12 Other _____
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<input type="radio"/> 4 Industrial	8 Air Conditioning	12 Other _____											

5 TYPE OF BLANK CASING USED: <input checked="" type="radio"/> 1 RMP (SR) <input checked="" type="radio"/> 2 PVC	3 RMP (SR) 4 ABS	5 Wrought 6 Asbestos-Cement	7 Fiberglass 8 Concrete Tile	9 Other (Specify below) _____
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Blank casing diameter 1 3/4 in. Was casing pulled? Yes ☒ No _____ If yes, how much 54'
Casing height above or below land surface 36 in.

6 GROUT PLUG MATERIAL:	1 Neat cement	<input checked="" type="radio"/> 2 Cement grout	3 Bentonite	4 Other _____
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Grout Plug Intervals: From _____ ft. to _____ ft., From _____ ft. to _____ ft., From _____ to _____ ft.

What is the nearest source of possible contamination:
See Below

<input checked="" type="radio"/> 1 Septic tank	6 Seepage pit	11 Fuel Storage	16 Other (specify below) _____
<input checked="" type="radio"/> 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	Direction from well? <u>South</u>
5 Cess pool	10 Livestock pens	15 Oil well/Gas well	How many feet? <u>40'</u>

FROM	TO	PLUGGING MATERIALS	FROM	TO	PLUGGING MATERIALS
<u>54'</u>	<u>3'</u>	<u>Cement grout</u>			
<u>3'</u>	<u>0'</u>	<u>Fill dirt / top soil</u>			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 08-09-2014 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. via home This Water Well Record was completed on (mo/day/year) 08-09-2014 under the business name of owner by (signature) Cale Clough

INSTRUCTIONS: Use typewriter or ballpoint 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. Visit us at <http://www.kdheks.gov/geo/waterwells>.