

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

(to rectify lacking or incorrect information)

County: Sedgwick

Location listed as:

Location changed to:

Section-Township-Range: 15-27S-2E

15-27S-2E

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

SE SW NW

Other changes: Initial statements: _____

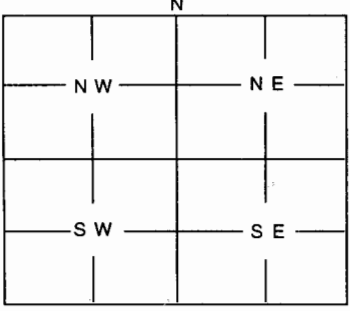
Changed to: _____

Comments: Latitude & longitude values define a large area,
not a point location.

verification method: Well address, area road map, and mapping
tool on KGS website.

initials: DRR date: 6/27/2006

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 1/41/41/4	Section 15	Number	Township 27 E S	Range 2 E																								
County: <u>Sedgwick</u>		Distance and direction from nearest town or city street address of well if located within city? <u>1026 Bristol Wichita, KS - 97.20785 - 97.18957</u>																												
2	WATER WELL OWNER: <u>Tung Tran</u> RR #, St. Address, Box #: <u>1026 Bristol</u> City, State, ZIP Code: <u>Wichita, KS</u> Board of Agriculture, Division of Water Resources Application Number:																													
3	MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX: 		4	DEPTH OF WELL <u>93</u> ft WELL'S STATIC WATER LEVEL _____ ft. WELL WAS USED AS: 1 Domestic 2 Irrigation 3 Feedlot 4 Industrial 5 Public Water Supply 6 Oil Field Water Supply 7 <u>Domestic (Lawn & Garden)</u> 8 Air Conditioning 9 Dewatering 10 Monitoring Well 11 Injection Well 12 Other _____																										
Was a chemical / bacteriological sample submitted to Department? Yes _____ No ☒ If yes, mo/day/yr sample was submitted _____ Water Well Disinfected: Yes ☒ No _____																														
5	TYPE OF BLANK CASING USED: 1 Steel 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (Specify below) 2 <u>PVC</u> 4 ABS 6 Asbestos-Cement 8 Concrete Tile																													
Blank casing diameter <u>5</u> in. Was casing pulled? Yes _____ No ☒ Casing height above or below land surface <u>3 ft</u> in. If yes, how much _____																														
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 _____ to _____ ft. What is the nearest source of possible contamination: 1 Septic tank 2 Sewer lines 3 Watertight sewer lines 4 Lateral lines 5 Cess Pool 6 Seepage pit 7 Pit privy 8 Sewage lagoon 9 Feedyard 10 Livestock pens 11 Fuel storage 12 Fertilizer storage 13 Insecticide storage 14 Abandoned water well 15 Oil well/Gas well 16 Other (specify below) _____ 																													
Direction from well? _____ How many feet? _____																														
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:10%;">FROM</th> <th style="width:10%;">TO</th> <th style="width:80%;">PLUGGING MATERIALS</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">0</td> <td style="text-align: center;">93</td> <td>well was plugged</td> </tr> <tr> <td></td> <td></td> <td>top to bottom with</td> </tr> <tr> <td></td> <td></td> <td>Bentonite</td> </tr> <tr><td></td><td></td><td></td></tr> <tr><td></td><td></td><td></td></tr> <tr><td></td><td></td><td></td></tr> <tr><td></td><td></td><td></td></tr> </tbody> </table>							FROM	TO	PLUGGING MATERIALS	0	93	well was plugged			top to bottom with			Bentonite												
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7	CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) <u>5/24/06</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>611</u> This Water Well Record was completed on (mo/day/year) _____ _____ under the business name of <u>Chase Drilling</u> by (signature) <u>D. Chase</u>																													
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.																														