

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

(to rectify lacking or incorrect information)

Location listed as:

Section-Township-Range: 18-27-3E

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

County: Butter

Location changed to:

18-27S-3E

SE SE SW

Other changes: Initial statements: _____

Changed to: _____

Comments: _____

verification method: Written & legal descriptions, area map on internet,
and Andover 1:24,000 topo. map.

initials: ORA date: 3/4/2004

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: County: BUTLER	Fraction $\frac{1}{4}$ $\frac{1}{4}$ $\frac{1}{4}$	Section 0	Number 18	Township T27	Number	Range 3	Number 0 EW																											
Distance and direction from nearest town or city street address of well if located within city? 515 ANGLE LANE ANDOVER, KS																																			
2	WATER WELL OWNER: JASON MAYGINNIS RR #, St. Address, Box #: 515 ANGLE LANE City, State, ZIP Code: ANDOVER, KS 67002 Board of Agriculture, Division of Water Resources Application Number:																																		
3	MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX: <div style="text-align: center; margin-top: 10px;"><table border="1" style="margin: auto; border-collapse: collapse;"><tr><td colspan="2" style="text-align: center;">N</td></tr><tr><td style="text-align: center;">NW</td><td style="text-align: center;">NE</td></tr><tr><td style="text-align: center;">W</td><td style="text-align: center;">E</td></tr><tr><td style="text-align: center;">SW</td><td style="text-align: center;">SE</td></tr><tr><td colspan="2" style="text-align: center;">S</td></tr></table></div>		N		NW	NE	W	E	SW	SE	S		4 DEPTH OF WELL 91 ft. WELL'S STATIC WATER LEVEL 66 ft. WELL WAS USED AS: <table style="width:100%;"><tr><td><input checked="" type="radio"/> 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 Domestic (Lawn & Garden)</td><td>11 Injection Well</td></tr><tr><td>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"/> If yes, mo/day/yr sample was submitted Water Well Disinfected: Yes <input checked="" type="checkbox"/> No						<input checked="" type="radio"/> 1 Domestic	5 Public Water Supply	9 Dewatering	2 Irrigation	6 Oil Field Water Supply	10 Monitoring Well	3 Feedlot	7 Domestic (Lawn & Garden)	11 Injection Well	4 Industrial	8 Air Conditioning	12 Other					
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5	TYPE OF BLANK CASING USED: <table style="width:100%;"><tr><td><input checked="" type="radio"/> 1 Steel</td><td>3 RMP (SR)</td><td>5 Wrought</td><td>7 Fiberglass</td><td>9 Other (Specify below)</td></tr><tr><td>2 PVC</td><td>4 ABS</td><td>6 Asbestos-Cement</td><td>8 Concrete Tile</td><td></td></tr></table> Blank casing diameter 6 in. Was casing pulled? Yes No <input checked="" type="checkbox"/> If yes, how much Casing height above or below land surface 30 in.								<input checked="" type="radio"/> 1 Steel	3 RMP (SR)	5 Wrought	7 Fiberglass	9 Other (Specify below)	2 PVC	4 ABS	6 Asbestos-Cement	8 Concrete Tile																		
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6	GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout <input checked="" type="radio"/> 3 Bentonite 4 Other Grout Plug Intervals: From 43 ft. to 2 ft., From ft. to ft., From ft. to ft. What is the nearest source of possible contamination: <table style="width:100%;"><tr><td>1 Septic tank</td><td>6 Seepage pit</td><td>11 Fuel storage</td><td>16 Other (specify below)</td></tr><tr><td>2 Sewer lines</td><td>7 Pit privy</td><td>12 Fertilizer storage</td><td>NONE</td></tr><tr><td>3 Watertight sewer lines</td><td>8 Sewage lagoon</td><td>13 Insecticide storage</td><td></td></tr><tr><td>4 Lateral lines</td><td>9 Feedyard</td><td>14 Abandoned water well</td><td></td></tr><tr><td>5 Cess pool</td><td>10 Livestock pens</td><td>15 Oil well/Gas well</td><td></td></tr></table> Direction from well? How many feet?								1 Septic tank	6 Seepage pit	11 Fuel storage	16 Other (specify below)	2 Sewer lines	7 Pit privy	12 Fertilizer storage	NONE	3 Watertight sewer lines	8 Sewage lagoon	13 Insecticide storage		4 Lateral lines	9 Feedyard	14 Abandoned water well		5 Cess pool	10 Livestock pens	15 Oil well/Gas well								
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7	CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 8-25-03 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 699 This Water Well Record was completed on (mo/day/year) under the business name of FLINT HILLS WINDMILL AND PUMP SERVICE by (signature) <i>Chuck Jones</i>																																		
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.																																			