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 _____ *24 - 27S - 3E*
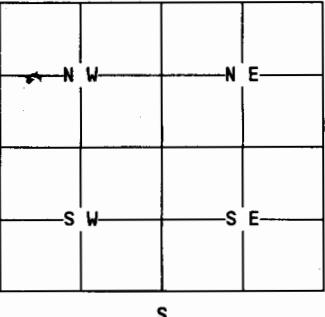
changed to *NE, SE, SE, 24-27S-3E*

Other changes made:
Initial statements: _____

_____

_____

Comments:
~~Changed to:~~ *Bosley's (well plugging contractor) house is at*
9865 SW Santa Fe Lake Rd., Eldon Brand's property (where the well
is located) is 2 houses North; 3 mi. W. of Augusta, KS then <¼ mi. N, on W.
/side of rd.
Phone call to plugging contractor (316-775-1542),
verificaton method: *± Augusta & Santa Fe Lake, KS, 1:24,000* initials: *DRL* date: *1/29/99*
topo maps

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

1	LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
	County: _Butler_	1/4 1/4 1/4	S24	T 27S	R 3 E

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

2	WATER WELL OWNER: _ELDoN BRAND_
	RR#, St. Address, Box #: _9724 SW Eugene Rd_
	City, State, ZIP Code : _Augusta, Ks 67010_ Board of Agriculture, Division of Water Resources Application Number:

3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:

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              N
   +-----+-----+-----+
   |  x-NW-|--NE-|     |
   |     |     |     |
 W +-----+-----+-----+ E
   |     |     |     |
   +--SW-+--SE-+-----+
   |     |     |     |
   +-----+-----+-----+
              S
```

4 DEPTH OF WELL.... _unknown_ ... _999_ .ft.

WELL'S STATIC WATER LEVEL _unknown_ .ft.

WELL WAS USED AS:

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	12 Other. _nothing_

Shut down over 30 yrs ago

Was a chemical/bacteriological sample submitted to Department? Yes.... No X..
If yes, mo/day/yr sample was submitted.....................

Water Well Disinfected: Yes. X ... No......

5 TYPE OF BLANK CASING USED:

(1 Steel)   3 RMP (SR)   5 Wrought   7 Fiberglass   9 Other (specify below)
2 PVC   4 ABS   6 Asbestos-Cement 8 Concrete Tile   ....

Blank casing diameter........ _5_ "..in.   Was casing pulled? Yes.. X .. No...... If yes, how much... _30 ft_.
Casing height above or below land surface.... _3 ft. below_ .m.

6 GROUT PLUG MATERIAL: 1 Neat cement (2 Cement grout) 3 Bentonite   4 Other.... _and ½ ton gravel_.

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	6 Seepage pit	11 Fuel storage	16 Other (specify below)
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	
5 Cess Pool	10 Livestock pens	15 Oil well/Gas well	

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

FROM	TO	PLUGGING MATERIALS
999	6	Gravel
6	3	Cement
3	0	Clay

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) .... _7-15-18_ .. under the business name of .. _Basley Backhoe Trenching_ .. by (signature) ....

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.