

County: Sedgwick Fraction SE NW NW NW Sec. 8 T 28 S R 1 (E)W

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

Owner: Meghan Smith

Location was listed as:

Section-Township-Range: None Given

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

Location changed to:

8-28S-1E

SE NW NW NW

Other changes: Initial statements: _____

Changed to: _____

Comments: Earlier faxed form said: "60 ft. east of Walnut St."

Verification method: Latitude & longitude, KGS' "LEO" conversion tool,
wellsite address & city street map, and mapping tool on
KGS website.

Submitted by: _____ initials: DRK date: 11/25/2013
to: 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> Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here ☒	Fraction 1/4 1/4 1/4 1/4	Section Number	Township Number T S	Range Number ☐ E ☐ W																																																						
2 WATER WELL OWNER: <u>Meghan Smith</u> RR#, St. Address, Box #: <u>3252 S Walnut St</u> City, State ZIP Code: <u>Wichita KS 67217</u>		Global Positioning Systems (GPS) information: Latitude: <u>37.6353</u> (in decimal degrees) Longitude: <u>-97.3511</u> (in decimal degrees) Elevation: _____ Datum: ☒ WGS84, ☐ NAD83, ☐ NAD27 Collection Method: ☐ GPS unit (Make/Model: _____) ☒ Digital Map/Photo, ☐ Topographic Map, ☐ Land Survey Est. Accuracy: ☐ <3 m, ☒ 3-5 m, ☐ 5-15 m, ☐ >15 m																																																								
3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX: N <table border="1" style="margin: auto; border-collapse: collapse;"> <tr> <td style="padding: 5px;">NW</td> <td style="padding: 5px;">NE</td> </tr> <tr> <td style="padding: 5px;">SW</td> <td style="padding: 5px;">SE</td> </tr> </table> S W E	NW	NE	SW	SE	4 DEPTH OF WELL <u>20</u> ft. WELL'S STATIC WATER LEVEL <u>12</u> ft. WELL WAS USED AS: ☐ Domestic ☐ Irrigation ☐ Feedlot ☐ Industrial ☐ Public Water Supply ☐ Oil Field Water Supply ☒ Domestic (Lawn & Garden) ☐ Air Conditioning ☐ Dewatering ☐ Monitoring ☐ Injection Well ☐ Other _____ Was a chemical/bacteriological sample submitted to Department? Yes ☐ No ☒																																																					
NW	NE																																																									
SW	SE																																																									
5 TYPE OF BLANK CASING USED: ☐ Steel ☒ PVC ☐ RMP (SR) ☐ ABS ☐ Wrought ☐ Asbestos-Cement ☐ Fiberglass ☐ Concrete Tile ☐ Other (Specify below) _____ Blank casing diameter <u>6</u> in. Was casing pulled? Yes ☐ No ☒ If yes, how much _____ Casing height above or below land surface <u>36</u> in.																																																										
6 GROUT PLUG MATERIAL: ☐ Neat cement ☒ Cement grout ☐ Bentonite ☐ Other _____ Grout Plug Intervals: From <u>0</u> ft. to <u>16</u> ft., From <u>16</u> ft. to <u>4</u> ft., From <u>4</u> ft. to <u>0</u> ft. What is the nearest source of possible contamination: ☐ Septic tank ☒ Sewer lines ☐ Watertight sewer lines ☐ Lateral lines ☐ Cess pool ☐ Seepage pit ☐ Pit privy ☐ Sewage lagoon ☐ Feedyard ☐ Livestock pens ☐ Fuel storage ☐ Fertilizer storage ☐ Insecticide storage ☐ Abandoned water well ☐ Oil well/Gas well ☐ Other (specify below) _____ Direction from well? <u>South</u> How many feet? <u>8</u> <table border="1" style="width:100%; border-collapse: collapse; margin-top: 10px;"> <thead> <tr> <th>FROM</th> <th>TO</th> <th>PLUGGING MATERIALS</th> <th>FROM</th> <th>TO</th> <th>PLUGGING MATERIALS</th> </tr> </thead> <tbody> <tr> <td>00'</td> <td>16'</td> <td>mortar mix</td> <td></td> <td></td> <td></td> </tr> <tr> <td>16'</td> <td>4'</td> <td>quick crete</td> <td></td> <td></td> <td></td> </tr> <tr> <td>4'</td> <td>00'</td> <td>quick crete</td> <td></td> <td></td> <td></td> </tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> </tbody> </table>					FROM	TO	PLUGGING MATERIALS	FROM	TO	PLUGGING MATERIALS	00'	16'	mortar mix				16'	4'	quick crete				4'	00'	quick crete																																	
FROM	TO	PLUGGING MATERIALS	FROM	TO	PLUGGING MATERIALS																																																					
00'	16'	mortar mix																																																								
16'	4'	quick crete																																																								
4'	00'	quick crete																																																								
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) <u>7/13/13</u> 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) <u>7/13/13</u> under the business name of <u>N/A - home owner</u> by (signature) <u>Meghan Smith</u>																																																										
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: 785/296-5524. Send one to Water Well Owner and retain one for your records. Visit us at http://www.kdheks.gov/waterwell/index.html .																																																										