

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

County: Greenwood

Location listed as:

Location changed to:

Section-Township-Range: None Given

18-285-13E

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

N2 SW SW SW

Other changes: Initial statements: _____

Changed to: _____

Comments: _____

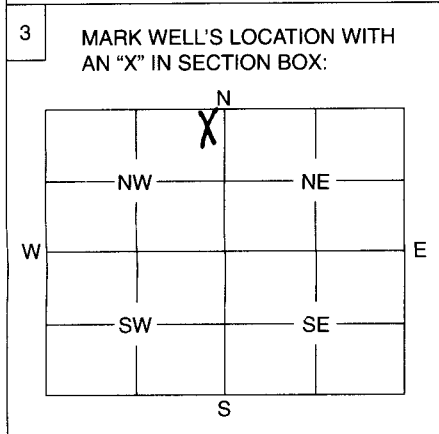
verification method: Location given for Point of Diversion on water right record in KGS' WIMAS database, and mapping tool & aerial photo on KGS website. initials: ERT date: 10/20/2009

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 Section Number Township Number Range Number
 County: Greenwood $\frac{1}{4}$ $\frac{1}{4}$ $\frac{1}{4}$ E/W

Distance and direction from nearest town or city street address of well if located within city?
Located in The City of Fall River

2 WATER WELL OWNER: City of Fall River 67047
 RR #, St. Address, Box #: P.O. Box 125 Board of Agriculture, Division of Water Resources
 City, State, ZIP Code: Fall River KS Application Number: 959127



4 DEPTH OF WELL 42 ft.
 WELL'S STATIC WATER LEVEL 18 ft.
 WELL WAS USED AS: Not in use for several yrs.

1 Domestic	<u>5 Public Water Supply</u>	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

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:

<u>1 Steel</u>	3 RMP (SR)	5 Wrought	7 Fiberglass	9 Other (Specify below)
2 PVC	4 ABS	6 Asbestos-Cement	8 Concrete Tile	

Blank casing diameter 6 in. Was casing pulled? Yes No X..... If yes, how much

Casing height above or below land surface 3ft Below in.

6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other GRAVEL

Grout Plug Intervals: From ft. to ft., From ft. to ft., From to ft.

What is the nearest source of possible contamination:

<u>1 Septic tank</u>	6 Seepage pit	11 Fuel storage	16 Other (specify below)
<u>2 Sewer lines</u>	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? South How many feet? 150

FROM	TO	PLUGGING MATERIALS
0	3	Dirt Back Fill
3	6	Cement
6	42	GRAVEL

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 3/10/2009 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. City officials This Water Well Record was completed on (mo/day/year) 6/8/09 under the business name of City of Fall River by (signature) Janet Burke City Clerk

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.