

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

(to rectify lacking or incorrect information)

County: Montgomery

Location listed as:

Section-Township-Range: 25-32-5EFraction (  $\frac{1}{4}$   $\frac{1}{4}$   $\frac{1}{4}$ ): \_\_\_\_\_

Location changed to:

25-32S-15ENW NW SE

Other changes: Initial statements: \_\_\_\_\_

Changed to: \_\_\_\_\_

Comments: \_\_\_\_\_

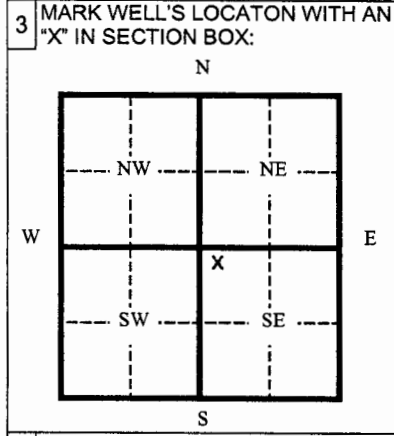
verification method: Montgomery Co. map, map on internet, aerial photoson KGS web.initials: E.P. date: 1/13/2006

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	Section Number	Township Number	Range Number
County: <b>Montgomery</b> NW ¼ NW ¼ SE ¼	<b>25</b>	<b>32</b>	<b>05 E</b>

Distance and direction from nearest town or city street address of well if located within city?  
**919 N. 16<sup>th</sup> St., Independence**

2 WATER WELL OWNER: <b>Crescent Oil Company</b>	Board of Agriculture, Division of Water Resources
RR#, St. Address, Box # <b>PO Box 667</b>	Application Number:
City, State, ZIP Code : <b>Independence, KS 67301</b>	



4 DEPTH OF WELL <b>13.85</b> ft. <b>Originally drilled to 14 ft bgs</b>												
WELL'S STATIC WATER LEVEL <b>5.3</b> ft.												
WELL WAS USED AS:												
<table border="0"> <tr> <td>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><b>10 Monitoring Well</b></td> </tr> <tr> <td>3 Feedlot</td> <td>7 Lawn and Garden (domestic)</td> <td>11 Injection Well</td> </tr> <tr> <td>4 Industrial</td> <td>8 Air Conditioning</td> <td>12 Other</td> </tr> </table>	1 Domestic	5 Public Water Supply	9 Dewatering	2 Irrigation	6 Oil Field Water Supply	<b>10 Monitoring Well</b>	3 Feedlot	7 Lawn and Garden (domestic)	11 Injection Well	4 Industrial	8 Air Conditioning	12 Other
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Was a chemical/bacteriological sample submitted to Department? Yes ___ No <b>X</b>												
If yes, mo/day/yr sample was submitted _____												
Water Well Disinfected: Yes ___ No <b>X</b>												

5 TYPE OF BLANK CASING USED:										
<table border="0"> <tr> <td>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><b>2 PVC</b></td> <td>4 ABC</td> <td>6 Asbestos-Cement</td> <td>8 Concrete Tile</td> <td></td> </tr> </table>	1 Steel	3 RMP (SR)	5 Wrought	7 Fiberglass	9 Other (specify below)	<b>2 PVC</b>	4 ABC	6 Asbestos-Cement	8 Concrete Tile	
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Blank casing diameter <b>2</b> in. Was casing pulled? Yes ___ No <b>X</b> If yes, how much _____										
Casing height above or below land surface <b>0.0</b> in. <b>Well overdrilled to 14 feet below ground surface (bgs)</b>										

6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout <b>3 Bentonite</b> 4 Other _____																				
Grout Plug Intervals From <b>3</b> ft. to <b>14</b> ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.																				
What is the nearest source of possible contamination:																				
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Direction from well? _____ How many feet? _____																				

FROM	TO	CODE	PLUGGING MATERIALS
0	3		Soil
3	14		Bentonite 285 lbs

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/yr) <b>10-24-05</b> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <b>531</b> This Water Well Record was completed on (mo/day/yr) <b>11-23-05</b> under the business name of <b>Geotechnical Services, Inc.</b> by (signature) <i>[Signature]</i>
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INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment, Bureau of Water, 1000 S W Jackson St., Ste. 420, Topeka, Kansas 66620-0001. Telephone: 785-296-3565. Send one to Water Well Owner and retain one for your records.