

County: Montgomery Fraction: SE NW NE SW Sec. 25 T. 32 S R. 15 E

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

Owner: KDHE BER MW-16

If location corrected, was listed as:

Section-Township-Range: 25-32

Location changed to:

25-32-15E

Fraction (¼ calls): SW

SE NW NE SW

Other changes: Initial statements: Lat 37 13' 53.70 Long 95 43' 23.71

Changed to: Lat 37.231583 Long -95.723252 datum NAD83

Comments: _____

Verification method: verified using LEOWEB and KGS mapper

Initials: SH Date: 07/28/2022

Submitted by: Kansas Geological Survey, Data Resources Library, 1930 Constant Ave., Lawrence, KS 66047-3724
 Kansas Dept. of Health & Environment, Bureau of Water, 1000 SW Jackson, Suite 420, Topeka, KS 66612-1367

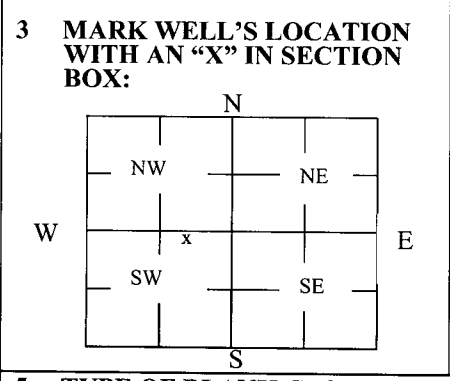
1 LOCATION OF WATER WELL: Fraction 1/4 1/4 1/4 SW 1/4 Section Number 25 Township Number T 32 S Range Number E W
 County: Montgomery

Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here
 800 N. 21st Street
 Independence, KS 67301

Global Positioning Systems (GPS) information:
 Latitude: 37° 13' 53.76" N (in decimal degrees)
 Longitude: 95° 43' 23.71" W (in decimal degrees)
 Elevation: 789 feet above MSL
 Horizontal Datum: WGS84, NAD83, NAD27
 Collection Method:

2 WATER WELL OWNER: KDHE BER
 RR#, St. Address, Box #: 1000 SW Jackson, Suite 410
 City, State ZIP Code: Topeka, KS 66612

GPS unit (Make/Model: _____)
 Digital Map/Photo, Topographic Map, Land Survey
 Est. Accuracy: < 3 m, 3-5 m, 5-15 m, > 15 m



4 DEPTH OF WELL 14 ft.
 WELL'S STATIC WATER LEVEL 8 ft.
 WELL WAS USED AS:

Domestic Public Water Supply Dewatering
 Irrigation Oil Field Water Supply Monitoring
 Feedlot Domestic (Lawn & Garden) Injection Well
 Industrial Air Conditioning Other _____

Was a chemical/bacteriological sample submitted to Department? Yes No

5 TYPE OF BLANK CASING USED:

Steel RMP (SR) Wrought Fiberglass Other (Specify below) _____
 PVC ABS Asbestos-Cement Concrete Tile

Blank casing diameter _____ in. Was casing pulled? Yes No If yes, how much 100%
 Casing height above or below land surface N/A in.

6 GROUT PLUG MATERIAL: N/A Neat cement Cement grout Bentonite Other Entire PVC well materials removed

Grout Plug Intervals: N/A From _____ ft. to _____ ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.

Well removed during excavation of source area. Excavation subsequently backfilled with clean material.
 What is the nearest source of possible contamination:

Septic tank Seepage pit Fuel storage Other (specify below) _____
 Sewer lines Pit privy Fertilizer storage Site is impacted from historical operations
 Watertight sewer lines Sewage lagoon Insecticide storage
 Lateral lines Feedyard Abandoned water well Direction from well? _____
 Cess pool Livestock pens Oil well/Gas well How many feet? _____

FROM	TO	PLUGGING MATERIALS	FROM	TO	PLUGGING MATERIALS
N/A					

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was ~~plugged under my jurisdiction and was completed on (mo/day/year) _____~~ March 2022 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. N/A. This Water Well Record was completed on (mo/day/year) April 4, 2022 under the business name of Burns & McDonnell by (signature) Trevor Gustafson

Send one white copy to Kansas Department of Health & Environment, Geology Section, 1000 SW Jackson Street, Ste. 420, Topeka, KS 66612-1367. Send one copy to WATER WELL OWNER and retain one for your records.
 Visit us at <http://www.kdheks.gov/waterwell/index.html> Telephone 785-296-5524.