

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

SVE-2

If location corrected, was listed as:

Location changed to:

Section-Township-Range: 25-32

25-32-15E

Fraction (1/4 calls): SW

SE NW NE SW

Other changes: Initial statements: _____

Changed to: _____

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

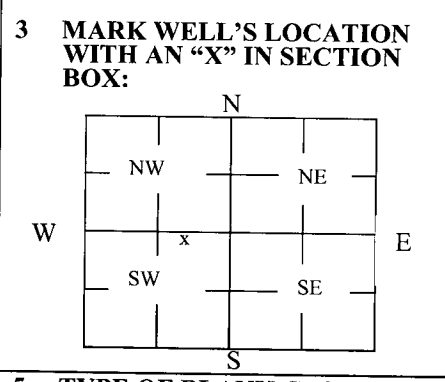
1 LOCATION OF WATER WELL: Fraction $\frac{1}{4}$ $\frac{1}{4}$ $\frac{1}{4}$ SW $\frac{1}{4}$ Section Number 25 Township Number T 32 S Range Number E W
 County: Montgomery

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: 37.231622 (in decimal degrees)
 Longitude: 95.723075 (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 8 ft.
 WELL'S STATIC WATER LEVEL DRY 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 Soil vapor extraction pilot test

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) Site is impacted from historical operations
 Sewer lines Pit privy Fertilizer storage
 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.