

County: Leavenworth Fraction: N2, SE Sec. 32 T. 7 S R. 22 E

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

Owner: Aaron Farms/Vossmer Family Trust/B. Phillips Hand Dug Well

If location corrected, was listed as:

Location changed to:

Section-Township-Range: _____

Fraction (¼ calls): SE, NW, SE

N2, SE

Other changes: Initial statements: Mark Aaron well owner. Lat. 39.3954 N, Long. -94.97834 W. TD 9 ft.

Casing 24-in PVC. See attached diagram.

Changed to: Aaron Farms/Vossmer Family Trust/B. Phillips. Lat. 39.395378 N, Long. -94.978306 W.

Comments: Hand-dug well illegally reconstructed April 2024. In June 2025 Notice of Violation Letter to land owners, KDHE required well be plugged by licensed water well contractor.

Verification method: Photos & info provided to KDHE, on-site visit by KDHE, Google Earth, STR Finder,

Initials: PKC Date: 8/4/2025

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

WATER WELL RECORD (WWC-5)

Plugged

KOLAR DOC ID 1847231 WELL ID _____

LOCATION OF WATER WELL

Latitude	39.3954	Longitude	-94.97834	Section	32	Township	7	Range	22	<input checked="" type="checkbox"/> E <input type="checkbox"/> W	Fraction	SE 1/4 NW 1/4 SE 1/4
Datum	NAD27	Elevation		County	Leavenworth							

WATER WELL OWNER

Name	Mark Aaron
Business	
Address	17219 Knapp Dr Leavenworth KS 66048
Well location	17219 Knapp Dr, Leavenworth, KS 66048
<input checked="" type="checkbox"/> at owner's address	

WELL WATER USE

Domestic Lawn/Garden

WELL INFORMATION

Depth of well: _____ 9 ft.
<input type="checkbox"/> Dry well
Static water level in well: _____ 5 ft.
<input checked="" type="checkbox"/> measured below land surface on (mm/dd/yy): 06/10/2025
<input type="checkbox"/> measured above land surface on (mm/dd/yy): _____

PERMIT & ID NUMBERS (AS REQUIRED)

DWR Application No.: _____
KDHE / EPA Project Code: _____
Site Name: _____
KDHE UIC Class V Form Completed: <input type="checkbox"/> Yes <input type="checkbox"/> No
County Permit: <input type="checkbox"/> Yes <input type="checkbox"/> No Permit ID: _____
Lease Name & Well #: _____
of boreholes: _____ # of dewatering wells: _____

CASING

Type of blank casing used: ThermalPlastic
Casing type details: _____
Blank casing diameter: 24 inches
Was casing removed? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Top of casing is currently 0 feet
<u>Above</u> ground
Reason required if top of casing is now less than 5 feet below ground surface for a hand dug well or less than 3 feet below ground surface for all other types of wells.

GROUT & PLUGGING MATERIALS

Grout or Plugging interval (ft.)		Material	Description
From	To		
0	4	other	soil
4	5	bentonite	
5	9	other	sand

COMMENTS

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CONTRACTOR'S OR LANDOWNERS CERTIFICATION

<p>This water well was plugged pursuant to the stated water well contractor's license and was completed on 06/10/2025. I certify that this record is true to the best of my knowledge and belief. This water well record was completed on 06/11/2025 under the business name of Digger Jim, Kansas Water Well Contractor's License No. 899 under the authority of the designated person as defined in K.A.R. 28-30-2(j) and signed and certified by the electronic signature of the designated person at its submittal James Manderscheid.</p>
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Send one copy to WATER WELL OWNER and retain one for your records.

KANSAS DEPARTMENT OF HEALTH AND ENVIRONMENT

Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka KS 66612-1367
(785) 296-3565 | K.S.A. 82a-1212 | v2022c

Attachment for water well record form WWC-5

8) Well Reconstruction drawing.



3/8" Holes Drilled
opposite one another
Horizontally & 2" apart
Vertically. Holes start
2" from Bottom & 12" Top to Bottom

1/2" Holes Drilled 2" from
Bottom & 4" Apart Horizontally
& 3" Apart Vertically
Barrel wrapped twice with
12 oz fabric then 3/4" Gravel