

County: Leavenworth Fraction SW NW SW SW Sec. 23 T 8 S R 22 EW

**CORRECTION(S) TO WATER WELL COMPLETION RECORD (WWC-5)**

(to rectify lacking or incorrect information)

Owner: U.S. Federal Bureau of Prisons

Location was listed as:

Location changed to:

Section-Township-Range: 22-52N-22E

23-8S-22E

Fraction (1/4 1/4): SE SE SE

SW NW SW SW

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

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

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

Verification method: Latitude & Longitude, KGS' "LEO" conversion tool,  
and mapping tool on KGS website.

initials: ORA date: 8/29/2014

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.

MW 18

WATER WELL PLUGGING RECORD Form WWC-5P KSA 82a-1212 ID NO. [ ]

1 LOCATION OF WATER WELL: County: <b>Leavenworth</b>	Fraction <b>SE 1/4 SE 1/4 SE 1/4</b>	Section Number <b>22</b>	Township Number <b>52N</b>	Range Number <b>22</b> <input checked="" type="radio"/> EW
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Distance and direction from nearest town or city street address of well if located within city?

**1300 Metropolitan Ave. Leavenworth, KS**

2 WATER WELL OWNER: <b>U.S. Federal Bureau of Prisons</b> RR#, St. Address, Box #: City, State ZIP Code:	Global Positioning Systems (decimal degrees, min. of 4 digits) Latitude: <b>39 20 04.52</b> Longitude: <b>094 56 09.84</b> Elevation: _____ Datum: _____ Data Collection Method: <b>Google Earth</b>
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3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:

N		
NW		NE
W		E
SW		SE
S		

**X**

4 DEPTH OF WELL **25'** ft.

WELL'S STATIC WATER LEVEL **Dry** ft

WELL WAS USED AS:

1 Domestic	5 Public Water Supply	9 Dewatering
2 Irrigation	6 Oil Field Water Supply	<input checked="" type="radio"/> 10 Monitoring
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

5 TYPE OF BLANK CASING USED:

1 Steel	3 RMP (SR)	5 Wrought	7 Fiberglass	<input checked="" type="radio"/> 9 Other (Specify below)
2 PVC	4 ABS	6 Asbestos-Cement	8 Concrete Tile	<del>Stainless Steel</del> <b>304</b>

Blank casing diameter **2"** in. Was casing pulled? Yes  No \_\_\_\_\_ If yes, how much **all 25'**

Casing height above or below land surface **2'** in.

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

Grout Plug Intervals: From **25'** ft. to **1'** ft., From **1'** ft. to **0'** ft., From \_\_\_\_\_ to \_\_\_\_\_ ft.

What is the nearest source of possible contamination:

1 Septic tank	6 Seepage pit	11 Fuel Storage	<input checked="" type="radio"/> 16 Other (specify below)
2 Sewer lines	7 Pit privy	12 Fertilizer storage	<b>Possible Landfill</b>
3 Watertight sewer lines	8 Sewage lagoon	13 Insecticide storage	
4 Lateral lines	9 Feedyard	14 Abandoned water well	Direction from well? _____
5 Cess pool	10 Livestock pens	15 Oil well/Gas well	How many feet? _____

FROM	TO	PLUGGING MATERIALS	FROM	TO	PLUGGING MATERIALS
		<b>Bentonite from 25'-1'</b>			
		<b>Soil from 1'-0'</b>			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) **7/22/14** and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **732**. This Water Well Record was completed on (mo/day/year) **7/26/14** under the business name of **JB Environmental Drilling** by (signature) *[Signature]*

**INSTRUCTIONS:** Use typewriter or ballpoint 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. Visit us at <http://www.kdheks.gov/geo/waterwells>.