County: <u>Leavenworth</u> Fraction <u>SE NE NW</u> S	E Sec. 23 T 8 S R 22 (E)W
CORRECTION(S) TO WATER WELL COMI (to rectify lacking or incorrect	
Owner: USACE	
Location was listed as:	Location changed to:
Section-Township-Range: 24-85-22E	23-85-22E
Fraction (444): None given	SENE NW SE
Other changes: Initial statements:	
Changed to:	•
Comments: <u>Section</u> , township, and raprojecting regular public land surposition method: <u>Latitude & longitude</u> , and mapping tool & aerial p	vey system over Ft. Leavenworth KGS' "LEO" conversion tool,

Submitted by: Kansas Geological Survey, Data Resources Library, 1930 Constant Ave., Lawrence, KS 660473726 to: Kansas Dept of Health & Environment, Bureau of Water, 1000 SW Jackson, Suite 420, Topeka, KS 66612-1367.

		L RECORD	Form W	WC-5		r Resources App. N			
1		OF WATER WELL:	Fraction			Township No.	Range Number		
County	y: Leav	renworth	14 14	<u> </u>	24	T 8 S	R 22 ZE W		
Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here									
			wher s address, theta	Chere L.	Longitude: -94.92	3305	(in decimal degrees)		
Fort Leavenworth Leavenworth, Kansas				Elevation: 809.65500					
					Datum: WGS 8	4, 🗹 NAD 83, 🗀	NAD 27		
		CLL OWNER: USACE	Ciellan Ave.		Collection Method:	en/Martale	, 1		
		15.0	venworth, KS 6602	7	GPS unit (Make/Model:) Digital Map/Photo, Topographic Map, Land Survey				
2.5,	,	- Fort Lea	ivenworth, NS 6002		Est. Accuracy:				
3 LOCATE WELL 20									
	WITH AN "X" IN SECTION BOX: N Depth(s) Groundwater Encountered (1)								
SECTI	N N	WELL'S STAT	CWATER LEVEL	3.64 A	helow land surface:	measured on mold	av/vr		
		Pump	test data: Well wate	r was	ft. after	hours pum	pinggpm		
Pump test data: Well water wasft. after									
w Bore Hole Diameter 5 in. to 30 ft., and in. to									
			TO BE USED AS:	Public wat	ersupply 🔲 Ge	othermal [Injection well		
SW	SI	Domestic					Other (Specify below)		
		Irrigation	bacteriological sample	Domesuc-lav	Department?	Ves 121 No			
	s		day/yr sample was sub			163 (2) 110			
	1 mile	Water well disin	fected? 🗌 Yes 🔽	No	***************************************				
5 TYPE	OF CA	SING USED: Stee							
CASING	JOINT	S: Glued Clar	nped Welded	Threaded					
Casing	diamet	er .2 in. to .19	ft., Diameter	in.	to ft., D	iameter	in. to ft.		
		above land surface			lbs./ft., Wall thi	ckness or gauge N	lo. Sch.40		
		EN OR PERFORATION		_	O.L (C				
	Steel Brass	☐ Stainless Steel ☐ Galvanized Steel	PVC None used (open h		Other (Specify)	*****************			
		REFORATION OPENING		,0,0,					
	Continuo	us slot 🛮 Mill slot	Gauze wrapped	Torch cui	Drilled holes	None (open hol			
CCDCE	Louvered	shutter Key punched	☐ Wire wrapped ☐	Saw cut	Other (specify)	Δ			
SCREEN-PERFORATED INTERVALS: From 19 ft. to									
From									
			From	ft. to	ft., From	fi.	to ft.		
6 GROU	T MA	TERIAL: Neat ceme	ent 🗹 Cement grout	t 🗹 Bentor	ite 🔲 Other	*******			
Grout Inte		From .12 ft. to		n .J	ft. to ft.,	From	ft. toft.		
What is the nearest source of possible contamination:									
□ Septic tank □ Lateral lines □ Pit privy □ Livestock pens □ Insecticide storage □ Other (specify below) □ Sewer lines □ Cesspool □ Sewage lagoon □ Fuel storage □ Abandoned water well									
		n sewer lines 🔲 Seepage p	it Feedyard	Fertilizer st	orage 🔲 Oil well/g		•••••		
		n well							
FROM	TO	LITHOLOG	IC LOG	FROM	TO LITHO, L	OG (cont.) or PLI	JGGING INTERVALS		
	6"	MW-35-01-14		 					
	10	asphalt clay with silts and grav	ele .	 					
	29	clay, brownish		++		Man, M. A. P. Comp			
	30	shale		†			····		
 									
	n	IBIC OR LANDAUSTE	Ne CENTINICATIO	N. TU					
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, or plugged									
under my jurisdiction and was completed on (mo/day/year) .03-18-15 and this record is true to the best of my Mowledge and belief. Kansas Water Well Contractor's License No102 This Water Well Record was completed on (mo/day/year) .10-12-15									
under the business name of Layne Christensen Company by (signature)									
INSTRUCTIONS Use typewriter or ball point pen PLEASE PRESS FIRMLY and PRINT clearly Please fill in blanks and check the conject answers. Send three copies									
(white, blue, pink) to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367 Telephone 785-296-5522 Send one cupy to WATER WELL OWNER and retain one for your records. Include fee of \$5.00 for each constructed well. Visit us at									
http://www.kdheks.gov/waterwell/index.html									
KSA 82a-1212 Check: White Copy, Blue Copy, Pink Copy									