County: <u>Leavenworth</u> Fraction <u>SENE NW SE</u>	Sec. 23 T 8 S R 22 EW
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 (1/4 1/4 1/4): None given	SE NE NW SE
Other changes: Initial statements:	
Changed to:	
Comments: <u>Section</u> , township, and rai	nge determined by
projecting regular public land sur	ver system over Ft. Leavenworth
Verification method: <u>Latitude</u> \$ longitude,	KGS' "LEO" conversion tool,
and massing tool & applied a	hotas on Kas website

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	Division of Water	Resources App. No	o		
		OF WATER WELL:	Fraction	• :	Section Number	Township No.	Range Number		
		venworth	1/4 1/4 Funtanan diatana 8	1/4 1/4		T 8 S	R 22 ØE □W		
	Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here								
1									
Fort Leavenworth Leavenworth, Kansas			Elevation: 809.86790						
					Datum: ☐ WGS 84, ☑ NAD 83, ☐ NAD 27				
2 WATER WELL OWNER: USACE				Collection Method:					
1	RR#, Street Address, Box #: 881 McClellan Ave. City, State, ZIP Code : Earl Larvenworth KS 66027			GPS unit (Make/Model:) Digital Map/Photo, Topographic Map, Land Survey					
City, State, ZIP Code : Fort Leavenworth, KS 66027					Est. Accuracy: <a></a> <a><a></a> <a><a><a><a><a><a><a><a><a><a><a><a><a>&lt;</a></a></a></a></a></a></a></a></a></a></a></a></a></a>				
3 LOCATE WELL									
	WITH AN "X" IN 4 DEPTH OF COMPLETED WELL 28.5 ft. (2) ft. (3) ft.								
SECI	N N	A: Depin(s) Ground	iwater Encountered	5.99 A	(4) helmy land surface r		3)		
	SECTION BOX: Depth(s) Groundwater Encountered (1)								
	EST. YIELDgpm. Well water was								
w - "	[ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]								
			TO BE USED AS:						
SW	/ s	E Domestic					Other (Specify below)		
		☐ Irrigation	☐ Industrial ☐ ☐ bacteriological sample	Domestic-law	n & garden M Mo	nitoring well	***************************************		
	s	Was a chemical	day/yr sample was sub	: Submitted to Smitted	Department:	ies Alvo			
ļ ,	-1 mile-		fected?  Yes		***************************************				
4 TVDI	OFC	SING USED: Stee			. < 1 4 4 4 7 2 2 2 4 7 7 2 7 7 7 7 7 7 7 7 7				
		S: Glued Clar				****			
Casin	g diamet	er .2 in. to .18.5	ft., Diameter	in. 1	o fl., D	iameter	in. to		
Casin	g height	above land surface:6"	in., Weight	••••••	lbs./ft., Wall thic	kness or gauge N	o. Sch.40.		
		EN OR PERFORATION		_					
	Steel	Stainless Steel			Other (Specify)	• • • • • • • • • • • • • • • • • • • •	*********		
☐ Brass ☐ Galvanized Steel ☐ None used (open hole)  SCREEN OR PERFORATION OPENINGS ARE:									
	Continuo	ous slot  Mill slot	Gauze wrapped	Torch cut	Drilled holes	☐ None (open hol	c)		
	Louvere	i shutter 🔲 Key punched	☐ Wire wrapped [	Saw cut	Other (specify)	***************************************			
SCREEN-PERFORATED INTERVALS: From									
	CDAV	EL PACK INTERVALS:	From	ii. to ,	n., From		10 II.		
	OKA V	ELFACK INTERVALS.					to ft.		
6 GRO	UT MA	TERIAL: Neat ceme	ent 🗹 Cement grout	Bentor	ite Other	****************			
Grout In	tervals:	TERIAL: Neat ceme From .11	16 ft., Fron	1.1	î. to . 11 ft.,	From	., fl. toft.		
		est source of possible contr	mination:		<b></b>				
	Septic ta Sewer lin	nk	es Pit privy Sewage lagoon	Livestock p			er (specify below)		
l H	Wntertio	ht sewer lines Seepage [	it Feedvard	Fertilizer st	orage Oil well/gr				
Direc	tion from	n well	··· — — · · · · · · · · · · · · · · · ·	. Distance					
FROM	TO	LITHOLOG	IC LOG	FROM			JGGING INTERVALS		
		MW-35-02-14							
0	6"	asphalt							
6"	11	silty clay		<u> </u>					
11	20	clay, brownish gravelly clay							
28	29	clay		<del> </del>					
29	30	shale		<b>1</b>					
	-			1					
	1								
						**************************************			
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 knowledge and belief.									
Kansas Water Well Contractor's License No. 102 This Water Well Record was completed on (pro/dxy/year) 10.12.15									
under the business name of Layne Christensen Company by (signature) by (signature) INSTRUCTIONS. Use typewriter or ball point pen. PLEASE PRESS FIRML) and PRINT clearly Please fill in blanks and check the correct 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	Telephone 785-296-5522 Send one copy 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/vgterwell/index.html  KSA 82a-1212  Check: White Copy, Blue Copy, Pink Copy									
KSA 82a-1212 Check: White Copy, Blue Copy, Pink Copy									