

County: Leavenworth Fraction NE SE SE NE Sec. 11 T 8 S R 22 EW

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

(to rectify lacking or incorrect information)

Owner: USACE

Location was listed as:

Section-Township-Range: 14-85-22E

Fraction (1/4 1/4 1/4): None given

Location changed to:

11-85-22E

NE SE SE NE

Other changes: Initial statements: _____

Changed to: _____

Comments: Section, township, and range determined by projecting regular public land survey system over Ft. Leavenworth.

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

initials: APL date: 5/3/2016

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.

WATER WELL RECORD

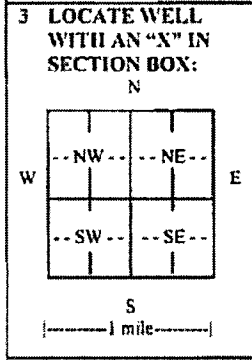
Form WWC-5

Division of Water Resources App. No.

1 LOCATION OF WATER WELL: County: Leavenworth	Fraction $\frac{1}{4}$ $\frac{1}{4}$ $\frac{1}{4}$ $\frac{1}{4}$	Section Number 14	Township No. T 8 S	Range Number R 22 <input checked="" type="checkbox"/> E <input type="checkbox"/> W
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Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here <input type="checkbox"/> Fort Leavenworth Leavenworth, Kansas	Global Positioning System (GPS) information: Latitude: 39.369533 (in decimal degrees) Longitude: 94.918474 (in decimal degrees) Elevation: 770.30130 Datum: <input type="checkbox"/> WGS 84, <input checked="" type="checkbox"/> NAD 83, <input type="checkbox"/> NAD 27 Collection Method: <input type="checkbox"/> GPS unit (Make/Model:) <input type="checkbox"/> Digital Map/Photo, <input type="checkbox"/> Topographic Map, <input type="checkbox"/> Land Survey Est. Accuracy: <input type="checkbox"/> <3 m. <input type="checkbox"/> 3-5 m. <input type="checkbox"/> 5-15 m. <input type="checkbox"/> >15 m.
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2 WATER WELL OWNER: USACE RR#, Street Address, Box #: 881 McClellan Ave. City, State, ZIP Code : Fort Leavenworth, KS 66027	
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4 DEPTH OF COMPLETED WELL **20**..... ft.

Depth(s) Groundwater Encountered (1)..... ft. (2)..... ft. (3)..... ft.

WELL'S STATIC WATER LEVEL: **19.69**..... ft. below land surface measured on mo/day/yr.....

Pump test data: Well water was..... ft. after..... hours pumping..... gpm

EST. YIELD..... gpm. Well water was..... ft. after..... hours pumping..... gpm

Bore Hole Diameter **6**..... in. to **20**..... ft., and..... in. to..... ft.

WELL WATER TO BE USED AS: Public water supply Geothermal Injection well
 Domestic Feedlot Oil field water supply Dewatering Other (Specify below)
 Irrigation Industrial Domestic-lawn & garden Monitoring well

Was a chemical/bacteriological sample submitted to Department? Yes No

If yes, mo/day/yr sample was submitted.....

Water well disinfected? Yes No

5 TYPE OF CASING USED: Steel PVC Other

CASING JOINTS: Glued Clamped Welded Threaded

Casing diameter **2**..... in. to **10**..... ft., Diameter..... in. to..... ft., Diameter..... in. to..... ft.

Casing height above land surface...**6**..... in., Weight..... lbs./ft., Wall thickness or gauge No. **Sch 40**.....

TYPE OF SCREEN OR PERFORATION MATERIAL:

Steel Stainless Steel PVC Other (Specify)

Brass Galvanized Steel None used (open hole)

SCREEN OR PERFORATION OPENINGS ARE:

Continuous slot Mill slot Gauze wrapped Torch cut Drilled holes None (open hole)
 Louvered shutter Key punched Wire wrapped Saw cut Other (specify)

SCREEN-PERFORATED INTERVALS: From...**10**..... ft. to...**20**..... ft., From..... ft. to..... ft.
 From..... ft. to..... ft., From..... ft. to..... ft.

GRAVEL PACK INTERVALS: From...**7**..... ft. to...**20**..... ft., From..... ft. to..... ft.
 From..... ft. to..... ft., From..... ft. to..... ft.

6 GROUT MATERIAL: Neat cement Cement grout Bentonite Other

Grout Intervals: From **4**..... ft. to **7**..... ft., From **1**..... ft. to **4**..... ft., From..... ft. to..... ft.

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
 Watertight sewer lines Seepage pit Feedyard Fertilizer storage Oil well/gas well

Direction from well..... Distance from well.....

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
		MW-56-01-14			
0	1	fill material			
1	10	clay			
10	12	sand, poorly graded			
12	20	clay with sands			

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) **03-25-15**..... 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 (mo/day/year) **10-12-15**..... under the business name of **Layne Christensen Company**..... by (signature) *[Signature]*

INSTRUCTIONS Use typewriter or ball point pen **PLEASE PRESS FIRMLY** 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 785-296-5522. Send one copy to WATER WELL OWNER and retain one for your records. Include fee of \$500 for each constructed well. Visit us at <http://www.kdheks.gov/waterwell/index.html>