

County: Leavenworth Fraction SW SW SW SW Sec. 13 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: 13-85-22E

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

Location changed to:

13-85-22E

SW SW SW SW

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: DRF date: 5/3/2016

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.

WATER WELL RECORD

Form WWC-5

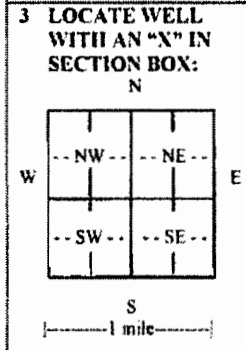
Division of Water Resources App. No.

1 LOCATION OF WATER WELL: County: Leavenworth	Fraction $\frac{1}{4}$ $\frac{1}{4}$ $\frac{1}{4}$ $\frac{1}{4}$	Section Number 13	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 .
**Fort Leavenworth
Leavenworth, Kansas**

Global Positioning System (GPS) information:
Latitude: **39.347417**..... (in decimal degrees)
Longitude: **94.917178**..... (in decimal degrees)
Elevation: **812.02480**.....
Datum: WGS 84, NAD 83, NAD 27
Collection Method:
 GPS unit (Make/Model:)
 Digital Map/Photo, Topographic Map, Land Survey
Est. Accuracy: <3 m, 3-5 m, 5-15 m, >15 m

2 WATER WELL OWNER: USACE
RR#, Street Address, Box #: **881 McClellan Ave.**
City, State, ZIP Code : **Fort Leavenworth, KS 66027**



4 DEPTH OF COMPLETED WELL 25..... ft.

Depth(s) Groundwater Encountered (1)..... ft. (2)..... ft. (3)..... ft.
WELL'S STATIC WATER LEVEL **11.39**..... 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 **25**..... 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 **15**..... 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 **15**..... ft. to **25**..... ft., From..... ft. to..... ft.
From..... ft. to..... ft., From..... ft. to..... ft.
GRAVEL PACK INTERVALS: From **13**..... ft. to **25**..... 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 **7**..... ft. to **13**..... ft., From **15**..... ft. to **7**..... 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-67-04-14			
0	6"	asphalt			
6"	20	clay with silts and sands			
20	25	clay, brown			

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) **03-15-15**..... 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) **10-22-15**..... under the business name of **Layne Christensen Company**..... by (signature) *Bob Krug*

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 \$5.00 for each constructed well. Visit us at <http://www.kdheks.gov/waterwell/index.html>