

County: Clay Fraction: NW, SW, NE, SW Sec. 4 T. 8 S R. 3 E

CORRECTION(S) to WATER WELL COMPLETION RECORD Form WWC-5 (to rectify lacking or incorrect information)

Owner: Trenton Canfield

If location corrected, was listed as:

Section-Township-Range: _____

Fraction (¼ calls): SW

Location changed to:

NW, SW, NE, SW

Other changes: Initial statements: No casing removed. No lat/long coordinates provided.

Changed to: 5 ft rock casing removed/caved in. Lat. 39.385419 N, Long. -97.1041

Comments: _____

Verification method: By phone, water well contractor verified removal of top 5 ft of rock casing. Clay Co.

Clay County Conservation District manager provided lat/long coordinates of the well. Used LEOWEB
to convert coordinates and obtain quarter fractions.

Initials: PKC Date: 7/30/2020

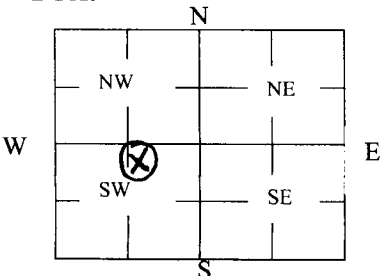
Submitted by: ☐ Kansas Geological Survey, Data Resources Library, 1930 Constant Ave., Lawrence, KS 66047-3724

☒ Kansas Dept. of Health & Environment, Bureau of Water, 1000 SW Jackson, Suite 420, Topeka, KS 66612-1367

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

1 LOCATION OF WATER WELL: County: <u>Clay</u>	Fraction <u>SW</u> $\frac{1}{4}$ $\frac{1}{4}$ $\frac{1}{4}$ $\frac{1}{4}$	Section Number <u>4</u>	Township Number <u>T 8 S</u>	Range Number <u>3</u> <input checked="" type="checkbox"/> E <input type="checkbox"/> W
Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here <input checked="" type="checkbox"/>		Global Positioning Systems (GPS) information: Latitude: _____ (in decimal degrees) Longitude: _____ (in decimal degrees) Elevation: _____ Horizontal Datum: <input type="checkbox"/> WGS84, <input type="checkbox"/> NAD83, <input type="checkbox"/> NAD27 Collection Method: _____		

2 WATER WELL OWNER: <u>Tranton Canfield</u> RR#, St. Address, Box #: <u>1535 18th rd</u> City, State ZIP Code: <u>Clay Center KS 67432</u>	<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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3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX: 	4 DEPTH OF WELL <u>55'</u> ft. WELL'S STATIC WATER LEVEL <u>25.5</u> ft. WELL WAS USED AS: <div style="display: flex; justify-content: space-between;"> <div style="width: 30%;"> <input type="checkbox"/> Domestic <input type="checkbox"/> Irrigation <input type="checkbox"/> Feedlot <input type="checkbox"/> Industrial </div> <div style="width: 30%;"> <input type="checkbox"/> Public Water Supply <input checked="" type="checkbox"/> Oil Field Water Supply <input type="checkbox"/> Domestic (Lawn & Garden) <input type="checkbox"/> Air Conditioning </div> <div style="width: 30%;"> <input type="checkbox"/> Dewatering <input type="checkbox"/> Monitoring <input type="checkbox"/> Injection Well <input type="checkbox"/> Other _____ </div> </div> Was a chemical/bacteriological sample submitted to Department? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
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5 TYPE OF BLANK CASING USED:

☐ Steel
☐ PVC

☐ RMP (SR)
☐ ABS

☐ Wrought
☐ Asbestos-Cement

☐ Fiberglass
☐ Concrete Tile

☒ Other (Specify below)
Hand dug

Blank casing diameter 36 in. Was casing pulled? Yes ☐ No ☒ If yes, how much _____

Casing height above or below land surface 0 in.

6 GROUT PLUG MATERIAL: ☐ Neat cement ☐ Cement grout ☒ Bentonite ☐ Other _____

Grout Plug Intervals: From 4 1/2 ft. to 5 1/2 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.

What is the nearest source of possible contamination:

☒ Septic tank
☐ Sewer lines
☐ Watertight sewer lines
☐ Lateral lines
☐ Cess pool

☐ Seepage pit
☐ Pit privy
☐ Sewage lagoon
☐ Feedyard
☐ Livestock pens

☐ Fuel storage
☐ Fertilizer storage
☐ Insecticide storage
☐ Abandoned water well
☐ Oil well/Gas well

☐ Other (specify below) _____

Direction from well? NW
 How many feet? 15 ft

FROM	TO	PLUGGING MATERIALS	FROM	TO	PLUGGING MATERIALS
<u>55'</u>	<u>25 1/2'</u>	<u>sand chlorinated</u>			
<u>25 1/2'</u>	<u>5 1/2'</u>	<u>sub soil</u>			
<u>5 1/2'</u>	<u>4 1/2'</u>	<u>Bentonite</u>			
<u>4 1/2'</u>	<u>0</u>	<u>sub soil</u>			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 4/15/20 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 646. This Water Well Record was completed on (mo/day/year) 4/15/20 under the business name of Thunder Pump & Piping LLC by (signature) Sodd Anderson

Send one white copy to Kansas Department of Health & Environment, Geology Section, 1000 SW Jackson Street, Ste. 420, Topeka, KS 66612-1367. Send one copy to WATER WELL OWNER and retain one for your records.
 Visit us at <http://www.kdheks.gov/waterwell/index.html> Telephone 785-296-5524.