

County: Grove Fraction NE-NW-NW Sec. 35 T. 11 S R 31 E/W

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

(to rectify lacking or incorrect information)

Owner: Wellbrock, Scott

Location was listed as:

Section-Township-Range: 3-11S-31W

Fraction (1/4 1/4 1/4): \_\_\_\_\_

Location changed to:

35-11S-31W

Other changes: Initial statements: \_\_\_\_\_

Changed to: \_\_\_\_\_

Comments: \_\_\_\_\_

Verification method: Mapped Address and Aerial Image

initials: DF date: 4/30/14

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.

1 LOCATION OF WATER WELL: County: <u>Grove</u>	Fraction <u>NE 1/4 NW 1/4 NW 1/4</u>	Section <u>3</u>	Number <u>11</u>	Township <u>11</u>	Range <u>31</u>	Number <u>EW</u>
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Distance and direction from nearest town or city street address of well if located within city?

2 WATER WELL OWNER: <u>Scott Wellbeck</u> RR #, St. Address, Box #: <u>3053 CR 18</u> City, State, ZIP Code: <u>OALY KS, 67798</u>	Board of Agriculture, Division of Water Resources Application Number: _____
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3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX: <div style="text-align: center; margin-top: 10px;"> <table border="1" style="margin: auto; border-collapse: collapse;"> <tr><td colspan="3" style="text-align: center;">N</td></tr> <tr><td style="text-align: center;">X</td><td style="width: 20px;"></td><td></td></tr> <tr><td style="text-align: center;">NW</td><td></td><td style="text-align: center;">NE</td></tr> <tr><td style="text-align: center;">W</td><td></td><td style="text-align: center;">E</td></tr> <tr><td style="text-align: center;">SW</td><td></td><td style="text-align: center;">SE</td></tr> <tr><td colspan="3" style="text-align: center;">S</td></tr> </table> </div>	N			X			NW		NE	W		E	SW		SE	S			4 DEPTH OF WELL <u>126</u> ft. WELL'S STATIC WATER LEVEL <u>115</u> ft. WELL WAS USED AS: <table style="width:100%; margin-top: 10px;"> <tr> <td><input checked="" type="radio"/> 1 Domestic</td> <td>5 Public Water Supply</td> <td>9 Dewatering</td> </tr> <tr> <td><input type="radio"/> 2 Irrigation</td> <td>6 Oil Field Water Supply</td> <td>10 Monitoring Well</td> </tr> <tr> <td><input type="radio"/> 3 Feedlot</td> <td>7 Domestic (Lawn &amp; Garden)</td> <td>11 Injection Well</td> </tr> <tr> <td><input type="radio"/> 4 Industrial</td> <td>8 Air Conditioning</td> <td>12 Other .....</td> </tr> </table> <p>Was a chemical / bacteriological sample submitted to Department? Yes ..... No <input checked="" type="checkbox"/> ..... If yes, mo/day/yr sample was submitted .....</p> <p>Water Well Disinfected: Yes <input checked="" type="checkbox"/> ..... No .....</p>	<input checked="" type="radio"/> 1 Domestic	5 Public Water Supply	9 Dewatering	<input type="radio"/> 2 Irrigation	6 Oil Field Water Supply	10 Monitoring Well	<input type="radio"/> 3 Feedlot	7 Domestic (Lawn & Garden)	11 Injection Well	<input type="radio"/> 4 Industrial	8 Air Conditioning	12 Other .....
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5 TYPE OF BLANK CASING USED: <input checked="" type="radio"/> 1 Steel    3 RMP (SR)    5 Wrought    7 Fiberglass    9 Other (Specify below) <input type="radio"/> 2 PVC    4 ABS    6 Asbestos-Cement    8 Concrete Tile .....	Blank casing diameter <u>4 1/2</u> in.    Was casing pulled? Yes ..... No <input checked="" type="checkbox"/> ..... If yes, how much .....
Casing height above or below land surface ..... in.	

6 GROUT PLUG MATERIAL:    1 Neat cement    2 Cement grout <input checked="" type="radio"/> 3 Bentonite    4 Other .....	Grout Plug Intervals: From <u>3</u> ft. to <u>9</u> ft., From ..... ft. to ..... ft., From ..... to ..... ft.																				
What is the nearest source of possible contamination: <table style="width:100%; margin-top: 5px;"> <tr> <td><input type="radio"/> 1 Septic tank</td> <td><input type="radio"/> 6 Seepage pit</td> <td><input type="radio"/> 11 Fuel storage</td> <td><input type="radio"/> 16 Other (specify below)</td> </tr> <tr> <td><input type="radio"/> 2 Sewer lines</td> <td><input type="radio"/> 7 Pit privy</td> <td><input type="radio"/> 12 Fertilizer storage</td> <td>.....</td> </tr> <tr> <td><input type="radio"/> 3 Watertight sewer lines</td> <td><input type="radio"/> 8 Sewage lagoon</td> <td><input type="radio"/> 13 Insecticide storage</td> <td>.....</td> </tr> <tr> <td><input checked="" type="radio"/> 4 Lateral lines</td> <td><input type="radio"/> 9 Feedyard</td> <td><input type="radio"/> 14 Abandoned water well</td> <td>.....</td> </tr> <tr> <td><input type="radio"/> 5 Cess pool</td> <td><input type="radio"/> 10 Livestock pens</td> <td><input type="radio"/> 15 Oil well/Gas well</td> <td>.....</td> </tr> </table>		<input type="radio"/> 1 Septic tank	<input type="radio"/> 6 Seepage pit	<input type="radio"/> 11 Fuel storage	<input type="radio"/> 16 Other (specify below)	<input type="radio"/> 2 Sewer lines	<input type="radio"/> 7 Pit privy	<input type="radio"/> 12 Fertilizer storage	.....	<input type="radio"/> 3 Watertight sewer lines	<input type="radio"/> 8 Sewage lagoon	<input type="radio"/> 13 Insecticide storage	.....	<input checked="" type="radio"/> 4 Lateral lines	<input type="radio"/> 9 Feedyard	<input type="radio"/> 14 Abandoned water well	.....	<input type="radio"/> 5 Cess pool	<input type="radio"/> 10 Livestock pens	<input type="radio"/> 15 Oil well/Gas well	.....
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Direction from well? <u>North</u> ..... How many feet? <u>50 ft.</u> .....																					

FROM	TO	PLUGGING MATERIALS
0'	3'	<u>Topsoil</u>
3'	9'	<u>Grout</u>
9'	110'	<u>Clean Soil</u>
110'	126'	<u>Sand.</u>

7 CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) <u>7/8/11</u> .....	and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. .... This Water Well Record was completed on (mo/day/year) .....
by (signature) <u>[Signature]</u> under the business name of .....	

INSTRUCTIONS: Use typewriter or ball point pen. Please press firmly and print clearly. Please fill in blanks, underline or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Ste. 420, Topeka, Kansas 66612-1367. Telephone: 785/296-5522. Send one to Water Well Owner and retain one for your records.