

County: Russell Fraction: NE NE SW Sec. 31 T. 13 S R. 13 W

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

Owner: Anderson Aerial Spraying MW 8

If location corrected, was listed as:

Section-Township-Range: 31-13-14

Location changed to:

31-13-13

Fraction (1/4 calls): NE NE SW

Other changes: Initial statements: _____

Changed to: _____

Comments: _____

Verification method: Google maps and KGS mapper based on address on WWC-5

Initials: SH Date: 10/21/2019

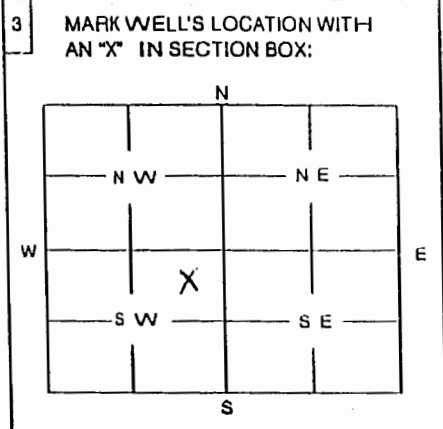
Submitted by: Kansas Geological Survey, Data Resources Library, 1930 Constant Ave., Lawrence, KS 66047-3724
 Kansas Dept. of Health & Environment, Bureau of Water, 1000 SW Jackson, Suite 420, Topeka, KS 66612-1367

1	LOCATION OF WATER WELL: County: <u>Russell</u>	Fraction <u>NE 1/4 NE 1/4 SW 1/4</u>	Section Number <u>31</u>	Township Number <u>13 S</u>	Range Number <u>14 W</u>
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Distance and direction from nearest town or city street address of well if located within city?

4231 Airport Terrace, Russell, Kansas

2	WATER WELL OWNER: RR #, St. Address, Box #: City, State, ZIP Code :	<u>Anderson Aerial Spraying</u> <u>P.O. Box 933</u> <u>Russell, Kansas 67665</u>	Board of Agriculture, Division of Water Resources Application Number:
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4 DEPTH OF WELL 18 ft

WELL'S STATIC WATER LEVEL ft.

WELL WAS USED AS:

1 Domestic	5 Public Water Supply	9 Dewatering
2 Irrigation	6 Oil Field Water Supply	<input checked="" type="checkbox"/> 10 Monitoring Well
3 Feedlot	7 Domestic (Lawn & Garden)	11 Injection Well
4 Industrial	8 Air Conditioning	12 Other

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

If yes, no/day/yr sample was submitted

Water Well Disinfected: Yes No X

5 TYPE OF BLANK CASING USED:

<input type="checkbox"/> 1 Steel	<input type="checkbox"/> 3 RMP (SR)	<input type="checkbox"/> 5 Wrought	<input type="checkbox"/> 7 Fiberglass	<input type="checkbox"/> 9 Other (Specify below)
<input checked="" type="checkbox"/> 2 PVC	<input type="checkbox"/> 4 ABS	<input type="checkbox"/> 6 Asbestos-Cement	<input type="checkbox"/> 8 Concrete Tile	

Blank casing diameter 2 in. Was casing pulled? Yes No X

Casing height above or below land surface n/a in. If yes, how much 18'

6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other

Grout Plug Intervals: From 0 ft. to 3 ft., From 3 ft. to 18 ft., From to ft.

What is the nearest source of possible contamination:

<input type="checkbox"/> 1 Septic tank	<input type="checkbox"/> 6 Seepage pit	<input type="checkbox"/> 11 Fuel storage	<input checked="" type="checkbox"/> 16 Other (specify below)
<input type="checkbox"/> 2 Sewer lines	<input type="checkbox"/> 7 Pit privy	<input type="checkbox"/> 12 Fertilizer storage	<u>Former UST</u>
<input type="checkbox"/> 3 Watertight sewer lines	<input type="checkbox"/> 8 Sewage lagoon	<input type="checkbox"/> 13 Insecticide storage	
<input type="checkbox"/> 4 Lateral lines	<input type="checkbox"/> 9 Feedyard	<input type="checkbox"/> 14 Abandoned water well	
<input type="checkbox"/> 5 Cess Pool	<input type="checkbox"/> 10 Livestock pens	<input type="checkbox"/> 15 Oil well/Gas well	

Direction from well? South How many feet? 235

FROM	TO	PLUGGING MATERIALS
<u>0</u>	<u>3</u>	<u>Cement grout (8")</u>
<u>3</u>	<u>18</u>	<u>Bentonite (8")</u>

8" overdrill to 18'

MW 8

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 1/30/2004 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 527 This Water Well Record was completed on (mo/day/year) under the business name of GeoCore Inc. by (signature) Dale Bell

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, Topeka, Kansas 66620-0001. Telephone: 785/296-3565. Send one to Water Well Owner and retain one for your records.