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

(to rectify lacking or incorrect information)

Location listed as:	County: #arvey Location changed to:
Section-Township-Range: 24-23-/F	24-235-1W
Fraction ( 1/4 1/4 1/4):	NE NW NE
Other changes: Initial statements:	
Changed to:	
Comments:	
verification method: Well address, city  Newton & Zimmerdale 1:24,0	map on internet, and  900 topo. maps  initials: DRA date: 4/11/2005

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.

Plugging MW-1

WATER WELL PLUGGING RECORD

Form WWC-5P

KSA 82a-1212

1 LOCATION O	F WATER WELL:	Fraction	Section Number	Township Number	Range Number	
County:	Ver	NE14 NW14NE114	24	23	18	
Distance and direction from nearest town or city street address of well if located within city?						
2 WATER WELL	OWNER: E34	Foam	jano , new	byites		
RR#, St. Addr City, State,	ess, Box #: 24	08 5 Kansas Rd Newton, KS	Board of Agric Application No	culture, Division of N umber:	dater Resources	
	S LOCATION WITH SECTION BOX: N N E	WELL'S STATIC WATH WELL WAS USED AS:  1 Domestic 2 Irrigation 3 Feedlot 4 Industrial Was a chemical/bact	6 Oil Field Water 7 Lawn and Garden ( 8 Air Conditioning	oly 9 Dewatering Supply 10 Monitoring Only 11 Injection 12 Other	g Well Well	
	s	Water Well Disinfec	ted: Yes(No).			
5 TYPE OF BL	ANK CASING USED:					
Blank casing height Casing height GROUT PLUG	4 ABS 6 Asb ng diameter ght above or below MATERIAL: 1 Neat Intervals: Fro	cement 2 Cement grown. 3.ft. to 20.ft	oulled? Yesin.  Bentonite  Fromft. to	No If yes, how n		
1 Septic 2 Sewer	tank lines ight sewer lines l lines	f possible contamination 6 Seepage pit 7 Pit privy 8 Sewage lagoon 9 Feedyard 10 Livestock pens	1: 11 Fuel storage 12 Fertilizer storag 13 Insecticide stora 14 Abandoned water ( 15 Oil well/Gas well	age Contami	ecify below)	
Direction	from well?		How many feet?			
0 3 a	3 SOIL	UGGING MATERIALS (1.2 ft <sup>3</sup> )  To (6.8 ft <sup>3</sup> )  Sund (981 ft <sup>3</sup> )				
7 CONTRACTOR	'S OR LANDOWNER'S	CERTIFICATION:This water	r well was plugged un	nder my jurisdiction a st of my knowledge and	and was completed d belief. Kansas	
by (signate	Contractor's Lice	under the business name	This Water Well	Record was completed	on (mo/day/year)	

INSTRUCTIONS: Use typewriter or ball point pen. <u>Please press firmly</u> and <u>print</u> 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.