

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

Location listed as:

Section-Township-Range: _____

Fraction ($\frac{1}{4}$ $\frac{1}{4}$ $\frac{1}{4}$): _____

County: Harvey

Location changed to:

32-23S-2W

SW SW SW SW

Other changes: Initial statements: Sedgwick County

Changed to: Harvey County

Comments: _____

verification method: Latitude & longitude, KGS' "LEO" conversion tool,
and mapping tool on KGS website.

initials: DRF date: 3/21/2012

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:	Fraction	Section	Number	Township	Number	Range	Number
	County: <u>SEDGWICK</u>	<u>SW 1/4 SW 1/4 SW 1/4</u>	<u>32</u>		<u>23S</u>		<u>2</u>	<u>EW</u>

Distance and direction from nearest town or city street address of well if located within city?

N 38.00023°
W 97.57291°

2	WATER WELL OWNER: <u>City of Wichita</u>	Board of Agriculture, Division of Water Resources
	RR #, St. Address, Box #: <u>6016 S. Spring Lake Rd</u>	Application Number:
	City, State, ZIP Code: <u>Halstead, KS 67056</u>	

3	MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4	DEPTH OF WELL <u>238.5</u> ft.
	<div style="text-align: center;">N NW ——— NE W ——— E SW ——— SE S X</div>		WELL'S STATIC WATER LEVEL <u>36</u> ft.
			WELL WAS USED AS:
			1 Domestic 5 <input checked="" type="radio"/> Public Water Supply 9 Dewatering
			2 Irrigation 6 Oil Field Water Supply 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 <u>X</u>
			If yes, mo/day/yr sample was submitted
			Water Well Disinfected: Yes <u>X</u> No

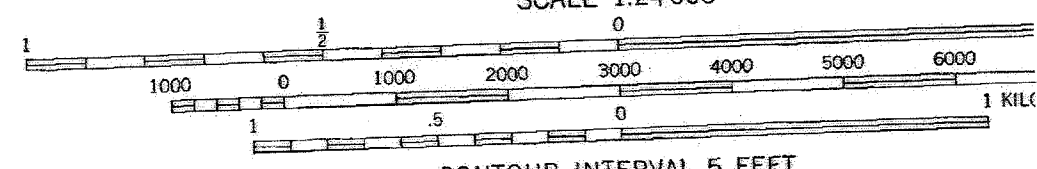
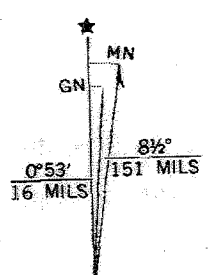
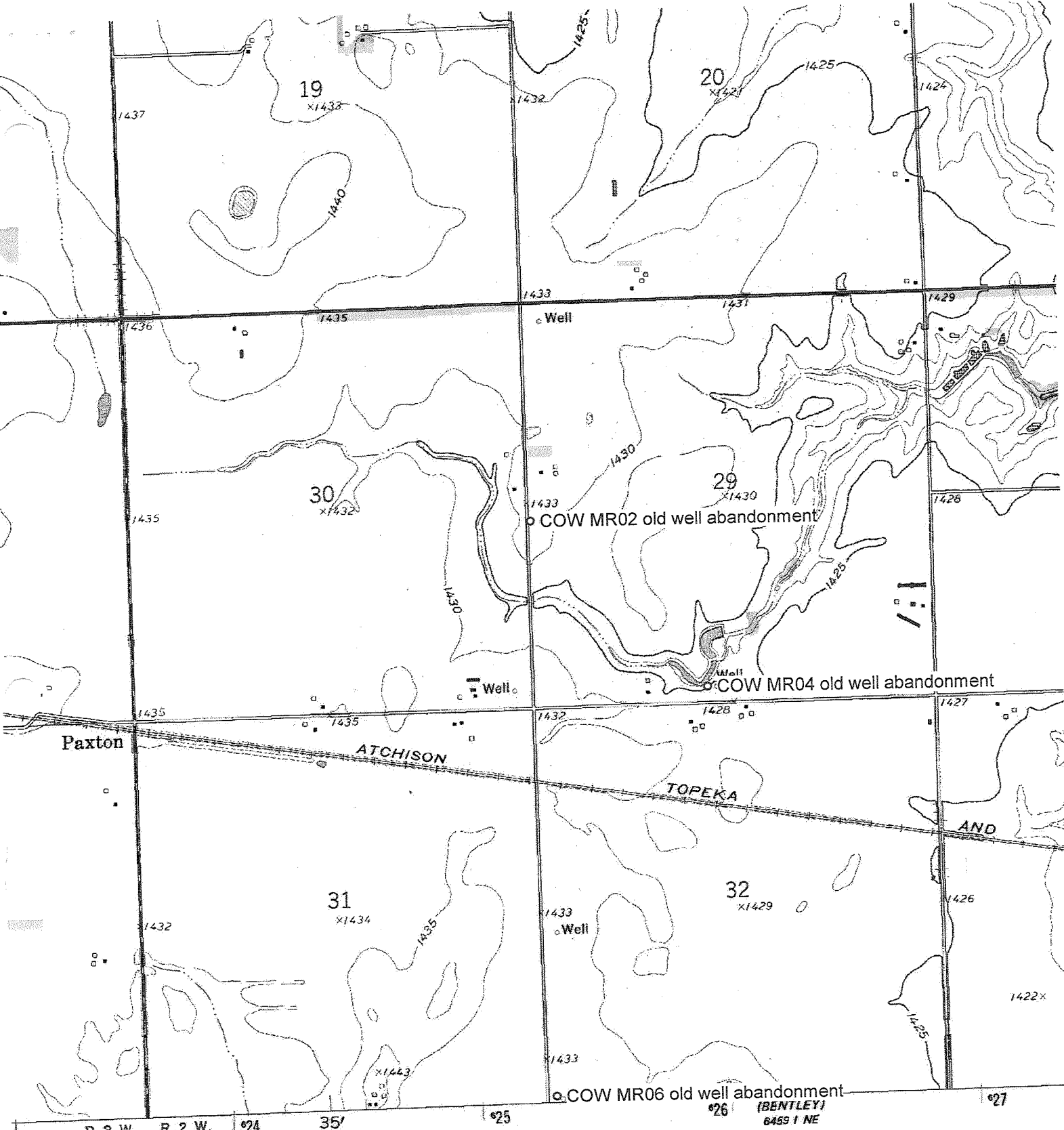
5	TYPE OF BLANK CASING USED:
	<input checked="" type="radio"/> Steel 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (Specify below)
	2 PVC 4 ABS 6 Asbestos-Cement 8 Concrete Tile
	Blank casing diameter <u>18</u> in. Was casing pulled? Yes <u>X</u> No If yes, how much <u>4'</u>
	Casing height above or below land surface <u>98"</u> in.

6	GROUT PLUG MATERIAL: 1 Neat cement 2 <input checked="" type="radio"/> Cement grout 3 Bentonite 4 Other
	Grout Plug Intervals: From <u>36</u> ft. to <u>4</u> ft., From ft. to ft., From ft. to ft.
	What is the nearest source of possible contamination:
	1 Septic tank 6 Seepage pit 11 Fuel storage 16 <input checked="" type="radio"/> Other (specify below)
	2 Sewer lines 7 Pit privy 12 Fertilizer storage
	3 Watertight sewer lines 8 Sewage lagoon 13 Insecticide storage
	4 Lateral lines 9 Feedyard 14 Abandoned water well
	5 Cess pool 10 Livestock pens 15 Oil well/Gas well
	Direction from well? How many feet?

FROM	TO	PLUGGING MATERIALS
238.5	36	Chlorinated Sand
36	4	Cement Grout
4	0	Native Soil

7	CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) <u>9/2/11/10</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>9711102</u> This Water Well Record was completed on (mo/day/year) <u>9/2/11/10</u> under the business name of <u>LAYNE CHRISTENSEN COMPANY</u> by (signature) <u>CHAD NELMAN, PROJECT MANAGER</u>
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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.



CONTOUR INTERVAL 5 FEET
NATIONAL GEODETIC VERTICAL DATUM OF 1929

UTM GRID AND 1978 MAGNETIC NORTH

THIS MAP COMPLIES WITH NATIONAL MAP ACCURACY STANDARDS
SERIES COLOMADO 80225 OR RESTON,