

CORRECTION TO WATER WELL RECORD (WWC-5)

The following correction(s) was made to the attached WWC-5 log, in order to file the item or to rectify lacking or incorrect information.

Fraction (1/4 1/4 1/4) Section-Township-Range changed:

listed as 7-235-23W

changed to SE SW NW, 7-235-23W

Other changes: Initial statements: _____

Changed to: _____

Comments: _____

verification method: Written & legal descriptions, position on plat map, and

Jetmore 1:24,000 topo. map (building shown on map) initials: DR date: 7/26/2001

submitted by: Kansas Geological Survey, Data Resources Library, 1930 Constant Ave., Lawrence, KS 66047-3726
to: Kansas Dept of Health & Environment Bureau of Water Industrial Programs, Bldg 283, Forbes Field, KS 66620

1	LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
	County: <i>Hodgeman</i>	<i>1/4 1/4 1/4</i>	<i>7</i>	<i>23</i>	<i>23W</i>

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

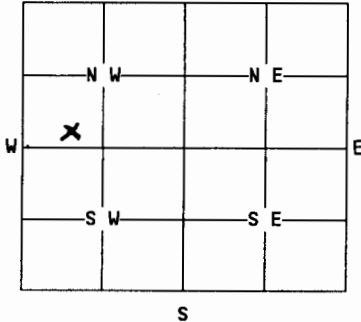
1 mile south of Jetmore - east side of road

2 WATER WELL OWNER: *Larry & Amy Fagen*

RR#, St. Address, Box #: *Box 443*
 City, State, ZIP Code: *Jetmore KS 67854*

Board of Agriculture, Division of Water Resources
 Application Number:

3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:



4 DEPTH OF WELL.....*203*.....ft.
 WELL'S STATIC WATER LEVEL.....*146*.....ft.

WELL WAS USED AS:

- 1 Domestic
- 2 Irrigation
- 3 Feedlot
- 4 Industrial
- 5 Public Water Supply
- 6 Oil Field Water Supply
- 7 Lawn and Garden Only
- 8 Air Conditioning
- 9 Dewatering
- 10 Monitoring Well
- 11 Injection Well
- 12 Other.....

Was a chemical/bacteriological sample submitted to Department? Yes.....No...
 If yes, mo/day/yr sample was submitted.....

Water Well Disinfected: Yes...... No.....

5 TYPE OF BLANK CASING USED:

- 1 Steel
- 2 PVC
- 3 RMP (SR)
- 4 ABS
- 5 Wrought
- 6 Asbestos-Cement
- 7 Fiberglass
- 8 Concrete Tile
- 9 Other (specify below)

Blank casing diameter.....*5*.....in. Was casing pulled? Yes..... No...... If yes, how much.....
 Casing height above or below land surface.....*3'*.....in.

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

Grout Plug Intervals: From *145* ft. to *140* ft., From *6* ft. to *3* ft., From..... to.....ft.

What is the nearest source of possible contamination:

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

Direction from well? How many feet?

FROM	TO	PLUGGING MATERIALS
<i>203</i>	<i>146</i>	<i>Chloranated Sand/Washed</i>
<i>146</i>	<i>140</i>	<i>Bentonite</i>
<i>140</i>	<i>6</i>	<i>Clay Subsoil</i>
<i>6</i>	<i>3</i>	<i>Bentonite - Mushroom CAP</i>
<i>3</i>	<i>0</i>	<i>TOPSOIL</i>

This was a demonstration by those listed below

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year).....*8-8-95*..... 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).....*8-8-95*..... under the business name of *Kansas Farm Bureau* by (signature).....*Larry Fagen*..... *well Plugging Demonstration*

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: 913/296-3565. Send one to Water Well Owner and retain one for your records.