

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 NW NW NW, 12-27-1

changed to SE SE NE, 13-27S-1W

Other changes: Initial statements: _____

Changed to: _____

Comments: Owner's address is 939 N. Edwards (found on internet)

verification method: Well owner's address, city map, and

Wichita East 1:24,000 topo. map.

initials: DRJ date: 9/20/2001

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: County: <u>SEDGWICK</u>	Fraction <u>NW 1/4 NW 1/4 NW 1/4</u>	Section Number <u>12</u>	Township Number <u>27</u>	Range Number <u>1</u>																											
Distance and direction from nearest town or city street address of well if located within city?																															
2 WATER WELL OWNER: <u>Beth Good</u> RR#, St. Address, Box #: City, State, ZIP Code : <u>Wichita KS 67209</u>																															
Board of Agriculture, Division of Water Resources Application Number:																															
3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX: 	4 DEPTH OF WELL <u>20</u>ft. WELL'S STATIC WATER LEVEL <u>2</u>ft. WELL WAS USED AS: <table style="width:100%;"> <tr> <td>1 Domestic</td> <td>5 Public Water Supply</td> <td>9 Dewatering</td> </tr> <tr> <td>2 Irrigation</td> <td>6 Oil Field Water Supply</td> <td>10 Monitoring Well</td> </tr> <tr> <td>3 Feedlot</td> <td>7 Lawn and Garden Only</td> <td>11 Injection Well</td> </tr> <tr> <td>4 Industrial</td> <td>8 Air Conditioning</td> <td>12 Other.....</td> </tr> </table> 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..... No.....				1 Domestic	5 Public Water Supply	9 Dewatering	2 Irrigation	6 Oil Field Water Supply	10 Monitoring Well	3 Feedlot	7 Lawn and Garden Only	11 Injection Well	4 Industrial	8 Air Conditioning	12 Other.....															
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5 TYPE OF BLANK CASING USED: <table style="width:100%;"> <tr> <td>1 Steel</td> <td>3 RMP (SR)</td> <td>5 Wrought</td> <td>7 Fiberglass</td> <td>9 Other (specify below)</td> </tr> <tr> <td>2 <u>PVC</u></td> <td>4 ABS</td> <td>6 Asbestos-Cement</td> <td>8 Concrete Tile</td> <td></td> </tr> </table> Blank casing diameter <u>5</u>in. Was casing pulled? Yes..... No. <u>X</u>.. If yes, how much..... Casing height above or below land surface <u>4.5 ft</u>in.					1 Steel	3 RMP (SR)	5 Wrought	7 Fiberglass	9 Other (specify below)	2 <u>PVC</u>	4 ABS	6 Asbestos-Cement	8 Concrete Tile																		
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6 GROUT PLUG MATERIAL: 1 Neat cement 2 <u>Cement grout</u> 3 Bentonite 4 Other..... Grout Plug Intervals: From <u>20</u> ft. to <u>3</u> ft., From.....ft. toft., From..... toft. What is the nearest source of possible contamination: <table style="width:100%;"> <tr> <td>1 Septic tank</td> <td>6 Seepage pit</td> <td>11 Fuel storage</td> <td>16 Other (specify below)</td> </tr> <tr> <td>2 <u>Sewer lines</u></td> <td>7 Pit privy</td> <td>12 Fertilizer storage</td> <td></td> </tr> <tr> <td>3 Watertight sewer lines</td> <td>8 Sewage lagoon</td> <td>13 Insecticide storage</td> <td></td> </tr> <tr> <td>4 Lateral lines</td> <td>9 Feedyard</td> <td>14 Abandoned water well</td> <td></td> </tr> <tr> <td>5 Cess Pool</td> <td>10 Livestock pens</td> <td>15 Oil well/Gas well</td> <td></td> </tr> </table> Direction from well? <u>West</u>..... How many feet? <u>6'</u>.....					1 Septic tank	6 Seepage pit	11 Fuel storage	16 Other (specify below)	2 <u>Sewer lines</u>	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								
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7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) <u>12/8/98</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) under the business name of by (signature) <u>[Signature]</u>																															
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: 913/296-3565. Send one to Water Well Owner and retain one for your records.																															