

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 16-275-1W

changed to SE SE SE, 16-275-1W

Other changes: Initial statements: _____

Changed to: _____

Comments: _____

verification method: Well address, city map, and

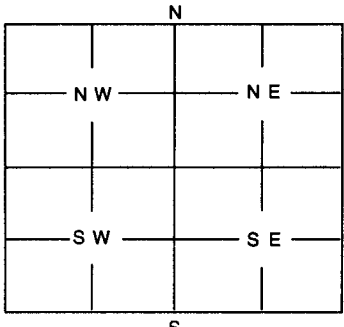
Wichita West 1:24,000 topo map. initials: DRL date: 10/29/2001

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>Sedgewick K</i>	$\frac{1}{4}$ $\frac{1}{4}$ $\frac{1}{4}$	<i>16</i>		<i>27S</i>		<i>1W</i>	

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

2	WATER WELL OWNER:	Board of Agriculture, Division of Water Resources
	RR #, St. Address, Box #: <i>7210 W. Central Ave.</i>	Application Number:
	City, State, ZIP Code: <i>Wichita KS</i>	

3	MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4	DEPTH OF WELL <i>20</i> ft												
		WELL'S STATIC WATER LEVEL ft. WELL WAS USED AS: <table border="0"> <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 Domestic (Lawn & Garden)</td> <td>11 Injection Well</td> </tr> <tr> <td>4 Industrial</td> <td>8 Air Conditioning</td> <td>12 Other</td> </tr> </table>		1 Domestic	5 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
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4 Industrial	8 Air Conditioning	12 Other													
Was a chemical / bacteriological sample submitted to Department? Yes No <i>X</i> If yes, mo/day/yr sample was submitted Water Well Disinfected: Yes No <i>X</i>															

5	TYPE OF BLANK CASING USED:			
	1 Steel	3 RMP (SR)	5 Wrought	7 Fiberglass
	☒ 2 PVC	4 ABS	6 Asbestos-Cement	9 Other (Specify below)
	Blank casing diameter <i>2</i> in. Was casing pulled? Yes <i>X</i> No If yes, how much <i>20 ft</i>			
	Casing height above or below land surface <i>Flush</i> in.			

6	GROUT PLUG MATERIAL:	1 Neat cement	2 Cement grout	☒ 3 Bentonite	4 Other
	Grout Plug Intervals:	From <i>20</i> ft.	to <i>0</i> ft.,	From ft.	to ft., From ft.
	What is the nearest source of possible contamination:				
	1 Septic tank	6 Seepage pit	☒ 11 Fuel storage	16 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
<i>20</i>	<i>0</i>	<i>Bentonite Chips</i>

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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) and this record is true to the best of my knowledge and belief. Kansas	
	Water Well Contractor's License No. <i>568</i>	This Water Well Record was completed on (mo/day/year)
	by (signature) <i>David Humphreys</i>	and the business name of <i>max's</i>

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.