

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 14-27-1W

changed to SE SE SE, 11-27S-1W

Other changes: Initial statements: _____

Changed to: _____

Comments: _____

verification method: Well address, city map, and

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

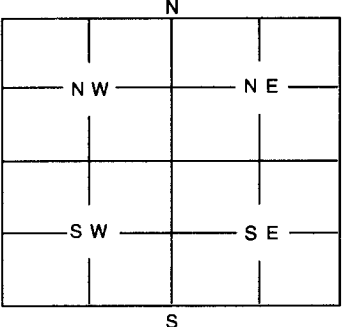
submitted by: Kansas Geological Survey, Data Resources Library, 1930 Constant Ave., Lawrence, KS 66047-3726
to: Kansas Dept of Health & Environment Bureau of Water Industrial Programs, Bldg 283, Forbes Field, KS 66620

1	LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County:	<i>Sedgwick</i>	$\frac{1}{4}$ $\frac{1}{4}$ $\frac{1}{4}$	<i>14</i>	<i>27</i>	<i>1 W</i>

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

1361 N. West, Wichita

2	WATER WELL OWNER:	Board of Agriculture, Division of Water Resources
	RR #, St. Address, Box #: <i>3935 W 13TH STR.</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>23</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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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:										
<table border="0"> <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 PVC</td> <td>☐ 4 ABS</td> <td>☐ 6 Asbestos-Cement</td> <td>☐ 8 Concrete Tile</td> <td></td> </tr> </table>		☒ 1 Steel	☐ 3 RMP (SR)	☐ 5 Wrought	☐ 7 Fiberglass	☐ 9 Other (Specify below)	☒ 2 PVC	☐ 4 ABS	☐ 6 Asbestos-Cement	☐ 8 Concrete Tile	
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Blank casing diameter <i>2</i> in. Was casing pulled? Yes ☒ No If yes, how much <i>23 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>23</i> ft. to <i>0</i> ft., From ft. to ft., From ft. to ft.																									
What is the nearest source of possible contamination: <table border="0"> <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 Sewer lines</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>						☐ 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	
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Direction from well? How many feet?																									

FROM	TO	PLUGGING MATERIALS
<i>23</i>	<i>0</i>	<i>Bentonite chips NW-11</i>

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 Kump</i> under 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.