

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 No legal description given

changed to SW SW SE, 26-27S-14W

Other changes: Initial statements: _____

Changed to: _____

Comments: _____

verification method: well owner's address, city map on internet,

and Wichita West 1:24,000 topo map. initials: DRJ date: 11/28/2001

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: <u>SEDGWICH</u>	<u>1/4</u> <u>1/4</u> <u>1/4</u>																														
Distance and direction from nearest town or city street address of well if located within city?																															
2 WATER WELL OWNER: <u>JAMES C. STRELOW</u>																															
RR#, St. Address, Box #: <u>1502 So ANNA</u>		Board of Agriculture, Division of Water Resources																													
City, State, ZIP Code : <u>WICHITA, KANSAS</u>		Application Number:																													
3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX: N <table border="1" style="margin: auto; border-collapse: collapse; width: 150px; height: 100px;"><tr><td style="width: 50px; height: 50px;"></td><td style="width: 50px; height: 50px;"></td></tr><tr><td style="text-align: center;">N W</td><td style="text-align: center;">N E</td></tr><tr><td style="width: 50px; height: 50px;"></td><td style="width: 50px; height: 50px;"></td></tr><tr><td style="text-align: center;">S W</td><td style="text-align: center;">S E</td></tr><tr><td style="width: 50px; height: 50px;"></td><td style="width: 50px; height: 50px;"></td></tr></table> S				N W	N E			S W	S E			4 DEPTH OF WELL..... <u>12</u>ft. WELL'S STATIC WATER LEVEL... <u>5</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><u>7</u> 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... <u>No</u> ... If yes, mo/day/yr sample was submitted..... Water Well Disinfected: <u>Yes</u> No.....			1 Domestic	5 Public Water Supply	9 Dewatering	2 Irrigation	6 Oil Field Water Supply	10 Monitoring Well	3 Feedlot	<u>7</u> Lawn and Garden Only	11 Injection Well	4 Industrial	8 Air Conditioning	12 Other.....					
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5 TYPE OF BLANK CASING USED:																															
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6 GROUT PLUG MATERIAL: 1 Neat cement <u>2</u> Cement grout 3 Bentonite 4 Other.....																															
Grout Plug Intervals: From.....ft. to.....ft., From.....ft. toft., From..... to.....ft.																															
What is the nearest source of possible contamination:																															
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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>10/22/01</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>James C. StreLOW</u>																															

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.