County: Sedgwick Fraction: SW SW SW NW Sec. 29 T 27 S R 1 W

CORRECTION(S) TO WATER WELL COMPLETION RECORD **Form WWC-5** (to rectify lacking or incorrect information)

Owner: Linda Steffen

If location corrected, was listed as:	**Location changed to:**
Section-Township-Range: None Given	29-27S-1W
Fraction (¼ calls):	SW SW SW NW

Other changes: Initial statements:

Changed to:

Comments:

Verification method: Well owner's address, and mapping tool on KGS website.

Initials: DRA Date: 10/24/2018

Submitted by: ☒ Kansas Geological Survey, Data Resources Library, 1930 Constant Avenue, Lawrence, KS 66047-3724
☐ Kansas Dept. of Health & Environment, Bureau of Water, 1000 SW Jackson, Suite 420, Topeka, KS 66612-1367

(01/26/2018)

WATER WELL PLUGGING RECORD Form WWC-5P KSA 82a-1212 ID NO.

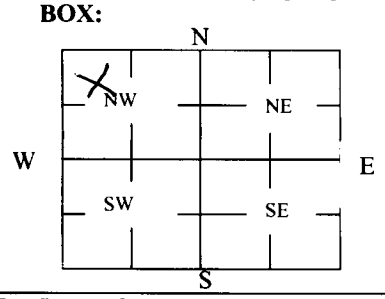
1 LOCATION OF WATER WELL: County: Sedgwick | Fraction: ¼ ¼ ¼ ¼ | Section Number | Township Number T | S | Range Number ☐ E ☐ W

Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here ☒

Global Positioning Systems (GPS) information:
Latitude: _____ (in decimal degrees)
Longitude: _____ (in decimal degrees)
Elevation: _____
Datum: ☐ WGS84, ☐ NAD83, ☐ NAD27
Collection Method:
☐ GPS unit (Make/Model: _____)
☐ Digital Map/Photo, ☐ Topographic Map, ☐ Land Survey
Est. Accuracy: ☐ < 3 m, ☐ 3-5 m, ☐ 5-15 m, ☐ > 15 m

2 WATER WELL OWNER: Linda Steffen
RR#, St. Address, Box #: 6985 Wetmore
City, State ZIP Code: Wichita KS 67209

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



4 DEPTH OF WELL 20 ft.
WELL'S STATIC WATER LEVEL 6 ft
WELL WAS USED AS:

☒ Domestic	☐ Public Water Supply	☐ Dewatering
☐ Irrigation	☐ Oil Field Water Supply	☐ Monitoring
☐ Feedlot	☐ Domestic (Lawn & Garden)	☐ Injection Well
☐ Industrial	☐ Air Conditioning	☐ Other _____

Was a chemical/bacteriological sample submitted to Department? Yes ☐ No ☐

5 TYPE OF BLANK CASING USED:

☐ Steel ☐ PVC | ☐ RMP (SR) ☐ ABS | ☐ Wrought ☐ Asbestos-Cement | ☐ Fiberglass ☐ Concrete Tile | ☒ Other (Specify below) Sandpoint x 2 wells

Blank casing diameter _____ in. Was casing pulled? Yes ☐ No ☐ If yes, how much _____
Casing height above or below land surface _____ in.

6 GROUT PLUG MATERIAL: ☐ Neat cement ☒ Cement grout ☐ Bentonite ☐ Other _____

Grout Plug Intervals: From 0 ft. to 20 ft., From 0 ft. to 20 ft., From _____ ft. to _____ ft.

What is the nearest source of possible contamination:

☐ Septic tank	☐ Seepage pit	☐ Fuel storage	☐ Other (specify below)
☐ Sewer lines	☐ Pit privy	☐ Fertilizer storage	
☒ Watertight sewer lines	☐ Sewage lagoon	☐ Insecticide storage	
☐ Lateral lines	☐ Feedyard	☐ Abandoned water well	Direction from well? West
☐ Cess pool	☐ Livestock pens	☐ Oil well/Gas well	How many feet? 25

FROM	TO	PLUGGING MATERIALS	FROM	TO	PLUGGING MATERIALS
		Quikrete Concrete			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 09/04/18 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) Linda Steffen

INSTRUCTIONS: Use typewriter or ballpoint 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, Geology Section, 1000 SW Jackson St., Ste. 420, Topeka, Kansas 66612-1367. Telephone: 785/296-5524. Send one to Water Well Owner and retain one for your records. Visit us at http://www.kdheks.gov/waterwell/index.html.