

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

County: Grant

Location listed as:

Section-Township-Range: 11-27-38W

Fraction (1/4 1/4 1/4): None Given

Location changed to:

11-27-38W

SE SE SE SE

Other changes: Initial statements: _____

Changed to: _____

Comments: _____

verification method: Latitude & longitude, KGS' "LEO" conversion tool,
and mapping tool on KGS website.

initials: DRL date: 3/16/2010

submitted by: Kansas Geological Survey, Data Resources Library, 1930 Constant Ave., Lawrence, KS 66047-3726
to: Kansas Dept of Health & Environment, Bureau of Water, 1000 SW Jackson, Suite 420, Topeka, KS 66612-1367.

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

1 LOCATION OF WATER WELL: Fraction $\frac{1}{4}$ $\frac{1}{4}$ $\frac{1}{4}$ $\frac{1}{4}$ Section Number 11 Township Number 20T 38S Range Number E W
 County: Grant
 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: 37.708088 (in decimal degrees)
 Longitude: -101.436516 (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:
 RR#, St. Address, Box #:
 City, State ZIP Code:

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

	N	
NW		NE
SW		SE
	S	

4 DEPTH OF WELL 300 ft.
 WELL'S STATIC WATER LEVEL 150 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 RMP (SR) Wrought Fiberglass Other (Specify below)
 PVC ABS Asbestos-Cement Concrete Tile
 Blank casing diameter 16 in. Was casing pulled? Yes No If yes, how much 3 ft. or
 Casing height above or below land surface 3.6 Below

6 GROUT PLUG MATERIAL: Neat cement Cement grout Bentonite Other _____
 Grout Plug Intervals: From 0 ft. to 140 ft., From _____ ft. to _____ ft., From _____ 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? _____
 Cess pool Livestock pens Oil well/Gas well How many feet? _____

FROM	TO	PLUGGING MATERIALS	FROM	TO	PLUGGING MATERIALS
0	3.6 ft	Cement grout 3.6 casing cutout			
3	150	Cement grout			
150	300	Chlorinated sand			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 2-26-10 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. Landowner. This Water Well Record was completed on (mo/day/year) _____ under the business name of P.M. Farm by (signature) Pat Garrison

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>.

Check one: White Copy Blue Copy Pink Copy