

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

County: Barber

Location listed as:

Section-Township-Range: 20-30-15

Fraction (  $\frac{1}{4}$   $\frac{1}{4}$   $\frac{1}{4}$ ): \_\_\_\_\_

Location changed to:

20-30S-15W

NW SE SE

Other changes: Initial statements: \_\_\_\_\_

Changed to: \_\_\_\_\_

Comments: \_\_\_\_\_

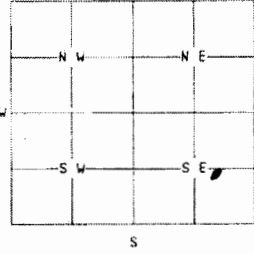
verification method: Legal description, county ownership map, position on plat map, and mapping tool on KGS website.

initials: DRG date: 7/12/2011

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.

1 LOCATION OF WATER WELL: Fraction 1/4 1/4 1/4 Section Number 20 Township Number 30 Range Number 15  
 County: Barber  
 Distance and direction from nearest town or city street address of well if located within city?

2 WATER WELL OWNER: Carroll W. Gibson  
 RR#, St. Address, Box #: 605 N. Cherry Board of Agriculture, Division of Water Resources  
 City, State, ZIP Code: Medicine Lodge KS 67104 Application Number:

3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:  
  
 DEPTH OF WELL 50 ft.  
 WELL'S STATIC WATER LEVEL 20 ft.  
 WELL WAS USED AS:  
 Domestic    5 Public Water Supply    9 Dewatering  
 Irrigation    6 Oil Field Water Supply    10 Monitoring Well  
 Feedlot    7 Lawn and Garden Only    11 Injection Well  
 Industrial    8 Air Conditioning    12 Other  
 Was a chemical/bacteriological sample submitted to Department? Yes... No...  
 If yes, no/day/yr sample was submitted.....  
 Water Well Disinfected: Yes..... No.

5 TYPE OF BLANK CASING USED:  
 Steel    3 RMP (SR)    5 Wrought    7 Fiberglass    9 Other (specify below)  
 PVC    4 ABS    6 Asbestos-Cement    8 Concrete Tile  
 Blank casing diameter... 6" in. Was casing pulled? Yes... No.  If yes, how much.....  
 Casing height above or below land surface... 13" in.

6 GROUT PLUG MATERIAL: 1 Neat cement    2 Cement grout     Bentonite    4 Other. Cement  
 Grout Plug Intervals: From 8 ft. to ..... ft., From ..... ft. to ..... ft., From ..... to ..... 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

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. .... This Water Well Record was completed on (mo/day/year)..... under the business name of ..... by (signature) Carroll W. Gibson 5-26-11

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.