

County: Sumner Fraction: NE, NE, NW, NE Sec. 36 T. 31 S R. 3 W

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

Owner: Randall Andra

If location corrected, was listed as:

Section-Township-Range: _____

Fraction (1/4 calls): none provided

Location changed to:

NE, NE, NW, NE

Other changes: Initial statements: Owner address: 1028 W 90th N, Conway Springs, KS.

Well location: 40th Ave N and Chicaskia Rd.

Changed to: Owner address: 1078 W. 90th Ave. N., Conway Springs, KS

Well location: Near old quonset shed 1600 feet W of stated intersection.

Comments: Contacted well owner and confirmed well location on Google Earth. Concrete pad 185 feet E-NE of old quonset shed. Lat. 37.314331, Long. -97.589970 (WGS84).

Verification method: Used KDHE STR Finder to get Quarter Fractions & confirm STR.

Initials: PKC Date: 12/31/2020

Submitted by: ☐ Kansas Geological Survey, Data Resources Library, 1930 Constant Ave., Lawrence, KS 66047-3724

☒ 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 36 Township Number T 31 S Range Number 3 ☐ E ☒ W

Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here ☐ 40th Ave N + Chickasaw rd.

Global Positioning Systems (GPS) information:

Latitude: _____ (in decimal degrees)

Longitude: _____ (in decimal degrees)

Elevation: _____

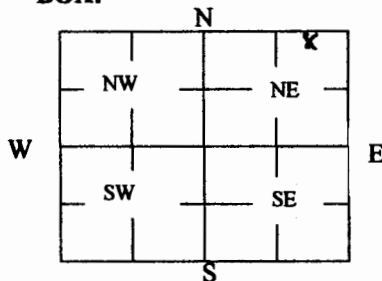
Horizontal Datum: ☐ WGS84, ☐ NAD83, ☐ NAD27

Collection Method: _____

2 WATER WELL OWNER: Randall Andrus
RR#, St. Address, Box #: 1029 W 90th N
City, State ZIP Code: Conasa Springs KS

☐ GPS unit (Make/Model): _____☐ Digital Map/Photo, ☐ Topographic Map, ☐ Land SurveyEst. Accuracy: ☐ < 3 m, ☐ 3-5 m, ☐ 5-15 m, ☐ > 15 m

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



4 DEPTH OF WELL 31 ft.

WELL'S STATIC WATER LEVEL 15 ft

WELL WAS USED AS:

☐ Domestic
☐ Irrigation
☒ Feedlot
☐ Industrial

☐ Public Water Supply
☐ Oil Field Water Supply
☐ Domestic (Lawn & Garden)
☐ Air Conditioning

☐ Dewatering
☐ Monitoring
☐ Injection Well
☐ 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)hand laid rock

Blank casing diameter 24 in. Was casing pulled? Yes ☒ No ☐ If yes, how much 6 ft
Casing height above or below land surface _____ in.

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

Grout Plug Intervals: From 5 ft. to 6 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.

What is the nearest source of possible contamination:

☐ Septic tank
☐ Sewer lines
☐ Watertight sewer lines
☐ Lateral lines
☐ Cess pool

☐ Seepage pit
☐ Pit privy
☐ Sewage lagoon
☐ Feedyard
☐ Livestock pens

☐ Fuel storage
☐ Fertilizer storage
☐ Insecticide storage
☐ Abandoned water well
☐ Oil well/Gas well

☐ Other (specify below)None

Direction from well? _____

How many feet? _____

FROM	TO	PLUGGING MATERIALS	FROM	TO	PLUGGING MATERIALS
31'	16'	fill sand			
16'	6'	clay soil			
6'	5'	Cement			
5'	0	fill dirt			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 11-20-20 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) 11-21-20 under the business name of Randall Andrus by (signature) Randall Andrus

Send one white copy to Kansas Department of Health & Environment, Geology Section, 1000 SW Jackson Street, Ste. 420, Topeka, KS 66612-1367. Send one copy to WATER WELL OWNER and retain one for your records.

Visit us at <http://www.kdheks.gov/waterwell/index.html> Telephone 785-296-5524.