

CORRECTION(S) TO WATER WELL RECORD (WWC-5)

(to rectify lacking or incorrect information)

County: Sumner

Location listed as:

Section-Township-Range: 21-32S-4WFraction ($\frac{1}{4}$ $\frac{1}{4}$ $\frac{1}{4}$): None Given

Location changed to:

21-32S-4WNE NW NW

Other changes: Initial statements: _____

Changed to: _____

Comments: _____

verification method:

Legal and written descriptions, position on plat map, other City of Argonia wells nearby, and mapping tool on AGS website.initials: DRd date: 10/5/2009

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	Section	Number	Township	Number	Range	Number																											
	County: <u>Sumner</u>	$\frac{1}{4}$ $\frac{1}{4}$ $\frac{1}{4}$	<u>S</u>	<u>21</u>	<u>T</u>	<u>32</u>	<u>R</u>	<u>4w</u> E/W																											
Distance and direction from nearest town or city street address of well if located within city? <u>1 mile S 1/2 mile East South Side Road.</u>																																			
2	WATER WELL OWNER: <u>City of Argonia</u>																																		
RR #, St. Address, Box #:			Board of Agriculture, Division of Water Resources																																
City, State, ZIP Code: <u>Argonia KS 67004</u>			Application Number: _____																																
3	MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4	DEPTH OF WELL <u>35</u> ft.																															
<div style="text-align: center;">N</div> <table border="1" style="width:100%; height:100px; border-collapse: collapse;"> <tr><td style="text-align: center;">X</td><td></td><td></td></tr> <tr><td style="text-align: center;">NW</td><td></td><td style="text-align: center;">NE</td></tr> <tr><td style="text-align: center;">SW</td><td></td><td style="text-align: center;">SE</td></tr> </table> <div style="text-align: center;">S</div>			X			NW		NE	SW		SE	WELL'S STATIC WATER LEVEL <u>10</u> ft.																							
			X																																
			NW		NE																														
			SW		SE																														
WELL WAS USED AS:																																			
<div style="display: flex; justify-content: space-between;"> <div> 1 Domestic 2 Irrigation 3 Feedlot 4 Industrial </div> <div> 5 Public Water Supply 6 Oil Field Water Supply 7 Domestic (Lawn & Garden) 8 Air Conditioning </div> <div> 9 Dewatering <u>10</u> Monitoring Well 11 Injection Well 12 Other </div> </div>																																			
Was a chemical / bacteriological sample submitted to Department? Yes No <u>X</u> If yes, mo/day/yr sample was submitted																																			
Water Well Disinfected: Yes <u>X</u> No																																			
5	TYPE OF BLANK CASING USED:																																		
1 Steel 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (Specify below) <u>2 PVC</u> 4 ABS 6 Asbestos-Cement 8 Concrete Tile																																			
Blank casing diameter <u>6</u> in. Was casing pulled? Yes No <u>X</u> If yes, how much																																			
Casing height above or below land surface <u>3 ft</u> in.																																			
6	GROUT PLUG MATERIAL: <u>1 Neat cement</u> 2 Cement grout 3 Bentonite 4 Other																																		
Grout Plug Intervals: <u>E</u> to From <u>10</u> ft. to <u>3</u> ft., From to ft.																																			
What is the nearest source of possible contamination:																																			
<div style="display: flex; justify-content: space-between;"> <div> 1 Septic tank 2 Sewer lines 3 Watertight sewer lines 4 Lateral lines 5 Cess pool </div> <div> 6 Seepage pit 7 Pit privy 8 Sewage lagoon 9 Feedyard <u>10 Livestock pens</u> </div> <div> 11 Fuel storage 12 Fertilizer storage 13 Insecticide storage 14 Abandoned water well 15 Oil well/Gas well </div> <div> 16 Other (specify below) </div> </div>																																			
Direction from well? <u>SE</u> How many feet? <u>450</u>																																			
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:15%;">FROM</th> <th style="width:15%;">TO</th> <th style="width:70%;">PLUGGING MATERIALS</th> </tr> </thead> <tbody> <tr> <td><u>35</u></td> <td><u>10</u></td> <td><u>chlorinated Sand</u></td> </tr> <tr> <td><u>10</u></td> <td><u>3</u></td> <td><u>Concrete Neat Cement</u></td> </tr> <tr> <td><u>3</u></td> <td><u>0</u></td> <td><u>Compacted Soil</u></td> </tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> </tbody> </table>									FROM	TO	PLUGGING MATERIALS	<u>35</u>	<u>10</u>	<u>chlorinated Sand</u>	<u>10</u>	<u>3</u>	<u>Concrete Neat Cement</u>	<u>3</u>	<u>0</u>	<u>Compacted Soil</u>															
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7	CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) <u>June 3-11-09</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. _____ This Water Well was completed on (mo/day/year) _____ under the business name of _____ by (signature) _____																																		

Test Well @
Well #6

RECEIVED

APR 08 2009

South Central District

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, Geology Section, 1000 SW Jackson St., Ste. 420, Topeka, Kansas 66612-1367. Telephone: 785/296-5522. Send one to Water Well Owner and retain one for your records.