

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

County: Osborne

Location listed as:

Location changed to:

Section-Township-Range: 28-7-14W

28-75-14W

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

C NE SW

Other changes: Initial statements: _____

Changed to: _____

Comments: From Hwy. 24 at N. edge of Alton, 3 1/2 mi. S., 2 mi. E.,
5/8 mi. S., 3/8 mi. E. into property.

verification method: Phone call to well owner, written & legal descriptions,
and Alton 1:24,000 topo. map.

initials: DRK date: 5/6/2003

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: County: OSBORNE	Fraction 1/4 1/4 1/4	Section Number 28	Township Number 7	Range Number 14 W
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Distance and direction from nearest town or city street address of well if located within city?
3 1/2 south 2 East 1 1/2 south 1/2 East of Alton KS

2 WATER WELL OWNER: **Jhan LaRosh**
 RR#, St. Address, Box #: **2097 W 100th DR**
 City, State, ZIP Code: **Osborne, Ks 67473** Board of Agriculture, Division of Water Resources
 Application Number:

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

N	W		E
W			E
	S		
		S	E

S

4 DEPTH OF WELL.....**36** ft.
 WELL'S STATIC WATER LEVEL.....**20** ft.
 WELL WAS USED AS:
 1 Domestic 5 Public Water Supply 9 Dewatering
 2 Irrigation 6 Oil Field Water Supply 10 Monitoring Well
 3 Feedlot 7 Lawn and Garden Only 11 Injection Well
 4 Industrial 8 Air Conditioning 12 Other.....
 Was a chemical/bacteriological sample submitted to Department? Yes.....No .
 If yes, mo/day/yr sample was submitted.....
 Water Well Disinfected: Yes No.....

5 TYPE OF BLANK CASING USED:
 1 Steel 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (specify below)
 2 PVC 4 ABS 6 Asbestos-Cement 8 Concrete Tile
 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: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other.....
 Grout Plug Intervals: From **4.5** ft. to **5.0** 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
0	4.5	Topsoil
4.5	5.0	Bentonite
5.0	20.0	Subsoil
20.0	36.0	SAND

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) **2/6/02**..... 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) **Jhan LaRosh** **2-6-02**.....

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: 913/296-3565. Send one to Water Well Owner and retain one for your records.