County: <u>Geary</u> Fraction <u>SENE NE</u>	Sec. 19 T 10 S R 5 EW
CORRECTION(S) TO WATER WELL COM  (to rectify lacking or incorrection)	(PLETION RECORD (WWC-5) ot information)
Owner: George Marcus	
Location was listed as:	Location changed to:
Section-Township-Range: 20 - 10 5 - 5 E	19-105-5E
Section-Township-Range: 20-105-5E  Fraction (1/4 1/4 1/4): None Given	SE NE NE
Other changes: Initial statements:	
Changed to	
Changed to:	
Comments:	
Verification method: <u>Wellsite</u> address, a <u>mapping</u> tool & aerial photos	rea road map, and
mapping too/ & aerial photos	s on KGS website.
	initials: R date: 7/19/20/3
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 Ja	ackson, Suite 420, Topeka, KS 00012-1307.

WATER WELL RECORD	Form W	VC-5			r Resources App. No				
1 LOCATION OF WATER WELL:	Fraction	1/ 1/		n Number	Township No.	Range N			
County: OCAP Street/Rural Address of Well Location;	funknown distance &	direction		20 L Positioning	T OS) System (GPS) in		ØÉ □W		
from nearest town or intersection: If at	owne <u>r's</u> address, check	here	Latitu	de:		(in dec	imal degrees)		
IN MILFORD RS 60 2	south finite	10	Longi	tude:	687-976 4, □ NAD 83, □	(in dec	imal degrees)		
9th STRUT Them GO EA	To Stone	Buildry	Elevan	fion <b>////</b> . Fixwes 84	1 51	 NAD 27			
2 WATER WELL OWNER: RR#, Street Address, Box #: City, State, ZIP Code : 1538	" MARCUS	1 -1	Collec	tion Method:					
RR#, Street Address, Box #:	Mc Forton	Rd.			ce/Model:oto, 🔲 Topographic	36 [7]	r 10		
City, state, Zir Code . June 1	Tion City, h	15 674	Est. Ac	ccuracy: $\square$	3 m, ☐ 3-5 m, ☐	5-15 m,	] >15 m		
3 LUCAIE WELL		STATE OF THE PARTY	<b>Y</b>						
WITH AN "X" IN SECTION BOX: Depth(s) Ground	COMPLETED WELI	(1) 72	ft	π.	ft. (	3)	ft.		
N WELL'S STAT									
Pumr	test data: Well water	was	ft. after hours pumping gpm						
W NWNE EST. YIELD Bore Hole Diam	gpm. Well water	was	ft. after hours pumping gpm						
WELL WATER	Bore Hole Diameter								
Domestic	☐ Feedlot ☐ (	Dil field wat	er supply	y 🔲 De	watering [] (		ecify below)		
Irrigation	☐ Industrial ☐ ☐						• • • • • • • • • • • • •		
	Was a chemical/bacteriological sample submitted to Department? Yes No  If yes, mo/day/yr sample was submitted								
	fected? Yes								
5 TYPE OF CASING USED: Stee	I DPVC C	Other							
CASING JOINTS: Glued Clar Casing diameter	nped 🗌 Welded	☐ Threade	d				C		
Casing diameter	ft., Diameter	Chud	to	ft., D	iameter	in. to	It.		
TYPE OF SCREEN OR PERFORATION	MATERIAL:								
☐ Steel ☐ Stainless Steel	PVC		Other (S	Specify)					
Brass Galvanized Steel SCREEN OR PERFORATION OPENIX		ole)							
Continuous slot Mill slot	Gauze wrapped	Torch cut	Dril	lled holes	☐ None (open hol	e)			
Continuous slot Mill slot 2   Mill slot 2   Continuous slot Key punched SCREEN-PERFORATED INTERVALS:	Wire wrapped	Saw cut	Oth	er (specify)		to	ft		
SCREEN-PERFORATED INTERVALS:	From	i. io <b>0.</b> C t. to	<i>]</i>	ft., From	ft.	to	ft.		
GRAVEL PACK INTERVALS:	From	ft. to		ft., From	ft.	to	ft.		
CORONIE AND THE TOTAL TO	From								
6 GROUT MATERIAL: Neat cem Grout Intervals: From ft. to	ent $\square$ Cement grout $0 \dots 2.5 \dots$ ft., From	Bento	ft. to	] Omer ft	From	ft. to	ft.		
What is the nearest source of possible cont	amination:	ve Cl	DSC						
i i i i i i i i i i i i i i i i i i i	nes 🔲 Pit privy	Livestock Fuel storage		Insecticide	e storage	ner (specify	below)		
☐ Sewer lines ☐ Cesspool ☐ Watertight sewer lines ☐ Seepage	Sewage lagoon   pit Feedyard	Fuel storag		Oil well/g					
Direction from well									
FROM TO LITHOLOG	GIC LOG	FROM	TO	LITHO. L	OG (cont.) <u>or</u> PLU	JGGING .	INTERVALS		
O Top Soil	,								
14 20 Day Burst	Sond								
20 32 Vellow Shall							····		
32 38 himistone	woll !								
38 44 Valow Shall							\		
63 95 Gara 0 2 1 Chan	11								
15 80 11 114 5 M									
65 00 CAMISTONS	DIC CHARACTERIZA A TANEC	Ki. This	on xxx11	voc Woonst	mioted Tracenst	micted or	Dingged		
7 CONTRACTOR'S OR LANDOWNE under my jurisdiction and was completed or	on (mo/day/year)	3/2013	nd this r	was up constructions to the	to the best of my	knowledg	i prugged ∉and belief		
Kansas Water Well Contractor's License N	Vo. 😽 📐 This 🕻	Vater Well I	Record w	as completed	d on (mo/day/year	() <b>(3</b> )			
under the business name of	an Mall Var	) Lang	by (s	signature)	l. s. ren /hj	A	Sold throng		
INSTRUCTIONS: Use typewriter or ball point pe (white, blue, pink) to Kansas Department of Health	and Environment, Bureau	of Water, Geo	logy Section	on, 1000 SW Ja	ackson St., Suite 420,	Topeka, Ka	ansas 66612-1367.		
Telephone 785-296-5524. Send one copy to WA http://www.kdheks.gov/waterwell/index.html.	TER WELL OWNER and	retain one for	your recor	rds. Include <u>fe</u>	ee of \$5.00 for each	constructed	well. Visit us at		
nttp://www.kaneks.gov/waterweii/index.ntmi.									