County: Jefferson Fraction NE SW SE SE Sec. 26 T // S R /8 E/W
CORRECTION(S) TO WATER WELL COMPLETION RECORD (WWC-5) (to rectify lacking or incorrect information) Owner: Leslie Brothers
Location was listed as: Location changed to:
Section-Township-Range: None Given 26-115-18 E
Section-Township-Range: None Given $26-1/5-18E$ Fraction ($\frac{1}{4}\frac{1}{4}\frac{1}{4}$): $SESESE$ NESUSESE
Other changes: Initial statements:
Changed to:
Comments:
Verification method: Latitude & longitude, KGS' "LEO" conversion tool,
Verification method: Latitude & longitude, KGS' "LEO" conversion tool, wellsite address & area road map, water rights information in
WIMAS database, and mapping tool on KGS website initials: Del date: 10/1/2012 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.

WATER	R WELL REC	CORD	Form WV	WC-5	Div	vision of Wate	r Resources App. N	0.	
1 LOCA	ATION OF WA	TER WELL:	Fraction		1	n Number		Range Number	
Count	y JEFFL	ENVOID	5E 1/4 SE 1/4 SE	Clabel	l Dositioning	T S	R DE DW		
Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here						Latitude: 39 3, 578 / (in decimal degrees)			
12015 1274 ST PERRY, KS						Global Positioning System (GPS) information: Latitude: 3.9			
12010 12.1 01 12 ERITA						Elevation:			
2 WATER WELL OWNER, / FOLIS ORANI. TO						Datum: WGS 84, NAD 83, NAD 27			
2 WATER WELL OWNER: LESLIE BROTHERS RR#, Street Address, Box #: 12015 127H ST					Collect	Collection Method: GPS unit (Make/Model:)			
City, State, ZIP Code : PERRY, K5 66073						☐ Digital Map/Photo, ☐ Topographic Map, ☐ Land Survey			
		PEKK	Y, KJ 68073	<u> </u>] 5-15 m,	
	TE WELL	A DEPTH OF	OMPLETED WELL	84		ft			
WITH AN "X" IN SECTION BOX: 4 DEPTH OF COMPLETED WELL &								(3) ft.	
SECT	N WELL'S STATIC WATER LEVEL								
Pump test data: Well water wasft. after hours pumping									
EST. YIELD SO gpm. Well water was								nping gpm	
W E Bore Hole Diameter									
	WELL WATER TO BE USED AS: Public water supply Geothermal Injection well Domestic Feedlot Oil field water supply Dewatering Other (Specify below)								
Trigation Industrial Domestic lawn & garden Monitoring well									
Was a chemical/bacteriological sample submitted to Department? Yes No									
	S If yes, mo/day/yr sample was submitted								
	Water well disinfected? Yes No								
5 TYPE OF CASING USED: Steel PVC Other									
CASING JOINTS: Glued Clamped Welded Threaded									
Casing diameter									
TYPE	TYPE OF SCREEN OR PERFORATION MATERIAL:								
	Steel Sta	ainless Steel	PVC		Other (S	Specify)		*****	
		Ivanized Steel	None used (open he	ole)					
SCREEN OR PERFORATION OPENINGS ARE: Continuous slot Mill slot Gauze wrapped Torch cut Drilled holes None (open hole)									
Continuous slot Mill slot Gauze wrapped Torch cut Drilled holes None (open hole) Louvered shutter Key punched Wire wrapped Saw cut Other (specify) SCREEN-PERFORATED INTERVALS: From ft. to ft., From ft. to									
SCREE	N-PERFORATE	ED INTERVALS:	From. 6.7	ft. to S	Z.	ft., From	ft.	to ft.	
	~	An Art Abdition of the Co.	From	ft. to	·	ft., From	ft.	. to ft. . to ft.	
	GRAVEL PAC	K INTERVALS:	From.	π. to 		II., From .		. to ft.	
6 GRO	UT MATERIA	L: Neat ceme	ent Cement grout	Bento	nite [Other			
Grout In		1 O ft. to	20 ft., From	1	ft. to	ft.	, From	ft. toft.	
		e of possible cont		-		FT	, p	d(:C.1 1)	
	Septic tank	Lateral lin	nes Pit privy Sewage lagoon	☐ Livestock ☐ Fuel stora		Insecticid Abandone	e storage Ot d water well	ther (specify below)	
	Sewer lines Watertight sewer		it Feedyard	Fuel stora Fertilizer		Oil well/g			
				. Distance	-	ell			
FROM	ТО	LITHOLOG		FROM	ТО	LITHO. I	OG (cont.) or PL	UGGING INTERVALS	
0	5 S		OSDIL						
-5	21 5/	WO CFIN	E /YELLOW)						
21			-MEDIYELLO						
21 25 45 55 78	45 5A 55 5A		-MEDIBLUE	γ			THE STATE OF THE S		
35	78 SA	WD (MEN.	-COURSE /YELLO	()					
78		LAY SHAL	E						
							A A STATE OF THE S		
							A		
# CONTENT CHOOMS ON I AND ON A MEDIC CERTIFICATION. This makes well was II constructed I reconstructed on I always									
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, or plugged under my jurisdiction and was completed on (mo/day/year) 5/10/12 and this record is true to the best of my knowledge and belief.									
Kansas Water Well Contractor's License No. 318 This Water Well Record was completed on (mo/day/year)									
under the business name of <u>RLUE VALLEY DRILLING ZNC</u> by (signature) by (signature) INSTRUCTIONS: Use typewriter or ball point pen. <u>PLEASE PRESS FIRMLY</u> and <u>PRINT</u> clearly. Please fill in blanks and check the correct answers. Send three copies									
INSTRUC	CTIONS: Use type	writer or ball point per	n. PLEASE PRESS FIRML	Y and PRINT o	learly. Ple	ease fill in blan	ks and check the corr	ect answers. Send three copi	
(white, bl	ue, pink) to Kansas 2 785-296-5524 Se	Department of Health end one copy to WA	n and Environment, Bureau TER WELL OWNER and	of Water, Geo retain one for	ology Section	on, 1000 SW J rds. Include f	ee of \$5.00 for each), Topeka, Kansas 66612-136 constructed well. Visit us	
Telephone 785-296-5524. Send one copy to WATER WELL OWNER and retain one for your records. Include fee of \$5.00 for each constructed well. Visit us at http://www.kdheks.gov/waterwell/index.html.									