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

			1. Table 1. Land 1. Control 1. Co			and the second second			
The falle	wing correct	ion(e) was	made to the	a attached W/W/	2.5 log in ord	ar to ractify	lacking or in	correct information.	
THE TOIL	JWILLS COLLECT	domon was	s made to the	e allacheu w w l	102 III 010	ICI IO ICCIIIA	lacking of in	Confect mitorination.	

listed as			-							
changed to	NE	NW	NE,	5-	115-	24E	· · · · · · · · · · · · · · · · · · ·			
Other changes: Initial	statements	s:						s ·	τ.	
Changed to:	-									
Comments:							٠.			
				-						
verification method:		add	ress,	cit	y map	, and	_Wolce	211	<u>/: 24,000</u>	<u> </u>
topo.	map						initiale:/	(D) da	ate: 12/20/	200

submitted by: Kansas Geological Survey, Data Resources Library, 1930 Constant Ave., Lawrence, KS 66047-3726 to: Kansas Dept of Health & Environment Bureau of Water Industrial Programs, Bldg 283, Forbes Field, KS 66620

w	ATER WELL RECO	RD Form WWC	C-5 KSA 8	2a-1212  [	D No. 111		
1 LOCATION OF WATER WELL:	Fraction	4		ction Number	er Townsh	nip Number	Range Number
County: Wood otte	NE 14	N & 14 N	E_1/4	S	T 1 [	N s	R 24 EN
Distance and direction from feares		ddress of well if loo	ated within c	ty?	11	1/	1. VC
	nap &		arale	Ρ	KWY	Man SS	くじけひ トン
2 WATER WELL OWNER : 58		4446	- Will-				/ //
RR#, St. Address, Box # : 3/8	ς Δ. Ε.	d' Room	900		Board o	of Agriculture.	Division of Water Resource
City, State, ZIP Code :	las texa	2 10001	553	99	Applica	tion Number:	
3 LOCATE WELL'S LOCATION WITH		MPLETED WELL.	'aa'	ft FLF\	VATION:		
AN "X" IN SECTION BOX:							1:70-2:1ft.
	WELL'S STATIC W	ATER LEVEL 6		ow land surfa	ace measured o	n mo/day/yr	0-28-01
<b>A</b>   !   ! <b>/</b> • \							pumping gpm
NW NE							pumping gpm
							. in. to ft.
₩ W		BE USED AS: 5			8 Air condition		njection well
÷ vv   1   1   -	1 Domestic		Oil field water		9 Dewatering	•	Other (Specify below)
sw sE	2 Irrigation						
Svv   SE	1						
<u>*                                    </u>	Was a chemical/bad	cteriological sample s	submitted to De				mo/day/yrs sample was sub
	mitted				ter Well Disinte		No No
5 TYPE OF BLANK CASING USED		Wrought iron	8 Concr		· ·		ed Clamped
1 Steel 3 RMP (S	•	Asbestos-Cement		(specify be	·		ded
2 PVC 4 ABS		Fiberglass					eaded.
Blank casing diameter	_						11 / //>
Casing height above land surface	in.,	weight		lb	s./ft. Wall thickn	ess or gauge l	10. S.C.IT 7. U
TYPE OF SCREEN OR PERFORA	TION MATERIAL:		<b>(</b> 7 PV		10	Asbestos-cen	nent
1 Steel 3 Stainles		Fiberglass		MP (SR)		Other (specify	•
		Concrete tile	9 AB			None used (o	•
SCREEN OR PERFORATION OPE	_		ızed wrapped		8 Saw cut		11 None (open hole)
	Aill slot Key punched		e wrapped		9 Drilled he		4
	- 1		ch cut	4	• •	• •	
SCREEN-PERFORATED INTERVA	From						toft.
GRAVEL PACK INTERVA		5 ft. to .	<i>a</i> a	ft Fro	om	ft.	to
	From			-			to
6 GROUT MATERIAL: 1 Neat	cement 2	Cement grout	3 Bento	nite	4 Other		
Grout Intervals: From	_						
What is the nearest source of poss					estock pens		Abandoned water well
•	ral lines	7 Pit priv	v		el storage		Oil well/Gas well
2 Sewer lines 5 Ces		8 Sewage	=		tilizer storage		Other (specify below)
3 Watertight sewer lines 6 See	•	9 Feedya	=		ecticide storage	10 \	Offier (Specify Delow)
Direction from well?	bage pit	9 Feeuya	uu		•		• • • • • • • • • • • • • • • • • • • •
FROM TO	LITHOLOGIC LOG	······································	FROM		nany feet?	DI HOOINO II	NTERVALO
			FROM	TO	1601	PLUGGING I	NIERVALS
0 1.51 Syrfac		/gravel	1.0	1,5	CONCIO		
1.3 13 CIGHT	13.0mm Cla	$\sim$	15.5	4.7	15ev1g~	rte	
15 10 11	1, 1,	W/ trace	7.5	スペ	2000	•	
Shape	1						
16 ad Shale	. Wet						<del></del>
		•					
7 CONTRACTOR'S OR LANDOWNE	R'S CERTIFICATIO	N: This water well	was (1) constr	ructed, (2) re	econstructed, or	(3) plugged ur	nder my jurisdiction and was
completed on (mo/day/year)5.	8101						powledge and belief. Kansas
Water Well Contractor's Licence No.			. ,				7 - 4/11 /
THE THE PARTY OF T	416	This Water M	Vell Becord w	as complete	d on (mo/day/yr	117	17.9/11 1
under the husiness name of		This Water V	Vell Record wa	=	d on (mo/day/yr	3 / 7	79
under the business name of	erralor	Inc.		by (	(signature)		Part
under the business name of  INSTRUCTIONS: Use typewriter or ball point pr Environment, Bureau of Water, Topeka, Kansas	CMQCON PLEASE PRESS FIRML	Yane PRINT clearly. Pleas	se fill in blanks, und	by (	(signature)	and top three copies	to Kansus Department of Health and constructed well.