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

(to rectify lacking or incorrect information)

Location listed as:	County: Wyan do He Location changed to:
Section-Township-Range: 32-115-12 E	32-115-25E
Fraction ( 1/4 1/4 1/4):	NW SE Sa)
Other changes: Initial statements:	
Changed to:	
Comments:	
verification method: Well address, city mapping tool & arrial photos	street map, and s on KGS website.
	initials: DPL date: 10/27/2008

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.

WATE	R WELI	RECORD	WM-2	Form W	WC-5	Divisio	on of Wate	r Resources	; App. No.			
1 LO	CATION O	F WATER W	ELL:	Fraction	G. 1	Section N	lumber		p Number			
Cou	nty: VV Y	andotte	aract town or a	ity street address	3/4) W 1/4	SZ Clobal Po	sitionino	T !	S (danimal day	R 12 (1/W) grees, min. of 4 digits)		
				•		Latitude				grees, mm. or 4 digits)		
3057	Herianley	Shanceks: h	ell locatelo	n Weskinsike	-of property	1						
2 WA	TER WEI	L OWNER:	Merrian La	ne from this 93 45 + Suit	, LLC	Elevation						
RR Cit	#, St. Addre	ss, Box # :	6750 W.	1305+.3017	120	Datum:						
City	y, State, ZIF	Code .	grelland fa	on his be	our			Method:				
3 LU	CATE WEI CATION	LL'S   4 DEP	TH OF COM	PLETED WEL	L20		ft.					
	CATION TH AN "X"	IN Depth(s	Denth(s) Groundwater Encountered (1) 10 ft (2) - ft (2) -									
	CTION BOX	X: WELL'	Depth(s) Groundwater Encountered (1)									
	N		Pump test data: Well water wasft. after									
		Est. Yi	eld <del></del> gpr	n: Well water v	vas	ft. after.		hours	pumping	gpm		
	w   NE -	·-   1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -		BE USED AS: 5	Public water	supply	8 Air o	conditionin	ig 11 Inj	ection well her (Specify below)		
w		$-$ E $\begin{vmatrix} 1 & Dom \\ 2 & Irriga \end{vmatrix}$								mer (Specify below)		
	W.   GE		1 111	austrial / DC	omesere (iawn	ce guraen)	المارس	mornig we				
8	₩ se -	was a c	hemical/bacte	riological sample	e submitted to	Departmen	nt? Yes.	No	، <b>بیکی</b> ، ر	If yes, mo/day/yrs		
<u> </u>	<u> </u>	— Sample	was submitted		Wat	er well disi	nfected?	Yes	No <del>\</del> .	<b></b> .		
	S											
		ING USED:	5 Wrought	Iron 8 -Cement 9	Concrete tile	1 1 )	CASINO	G JOINTS:		Clamped		
À	Steel	3 RMP (SR)	7 Fiberglas	-Cement 9	Other (specify	below)			Weided	سلا ،		
Blank o	asing diame	eter 2	in. to 70	ft Diamete	r —	in. to	ft	Diameter -		in. toft.		
Casing	height abov	e land surface	Flush	in., Weight	<del></del>	.lbs./ft.	Wall thic	kness or g	uage No.	Sch. 40		
TYPE	OF SCREE	N OR PERFOR	ATION MATI	ERIAL:								
1 Steel 3 Stainless Steel 5 Fiberglass 7 VC 9 ABS 11 Other (Specify)												
	Brass				M (SR) 10	Asbestos-C	ement	12 None	used (open	noie)		
SCREEN OR PERFORATION OPENINGS ARE:  1 Continuous slot (3) Mill slot 5 Gauzed wrapped 7 Torch cut 9 Drilled holes 11 None (open hole)												
2 Louvered shutter 4 Key punched 6 Wire wrapped 8 Saw Cut 10 Other (specify)												
2 Louvered shutter 4 Key punched 6 Wire wrapped 8 Saw Cut 10 Other (specify)  SCREEN-PERFORATED INTERVALS: From												
From												
	GRAVEL	PACK INTER	VALS: From. From		tt. to ft to	π.,	From	<del></del>	II. to	п. ft.		
								) ,				
	OUT MATE		at cement 2	Cement grout	3 Bentonite	4 Other	Lon	crete				
	ntervals:	From <b>&amp;</b> . source of possi		,	m	. It. to	? It	, From	• • • • • • • • • • • • • • • • • • • •	ft. toft.		
	Septic tank	•	Lateral lines		10 Lives	ock pens	13 Ins	ecticide St	orage	16 Other (specify		
	Sewer lines		Cess pool	8 Sewage lagoo				andoned v		below)		
		sewer lines 6	Seepage pit	9 Feedyard	12 Fertili	zer Storage	e 15 Oi	l well/gas	well			
		<u> 1?</u>				y feet?						
FROM	1	Cill 10	LITHOLOGIC	CLOG	FROM	1 TO		PLUGO	GING INT	ERVALS		
0	10	Scity Ci	ay				<del> </del>					
20		Limeston	<u> </u>									
										,		
										·		
							-					
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged												
under my jurisdiction and was completed on (mo/day/year)												
		~ /	,	, ,, ,					y/year)	-21-03		
under th	ctions us	name of Bela	noint pen DIF	ASE PRESS FIRM	Y and PRINT also	y (signatu	re)	underline a	trala the ar	orrect answers. Send top		
three cop	ies to Kansas I	Department of Heal	th and Environme	nt, Bureau of Water	, Geology Section	ı, 1000 SW Ja	ackson St., S	Suite 420, To	peka, Kansas	66612-1367. Telephone		
785-296-5522. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well. Visit us at												
http://www.kdheks.gov/waterwell/index.html.												