County: Geary	Fraction <i>NE -</i> S&	) - รผ	Sec	30	T	//	_S R_	5-	(E)w	
CORRECTION(S) TO WATER WELL COMPLETION RECORD (WWC-5) (to rectify lacking or incorrect information)										
Owner: Litzinger, Adam		g or moorroot mi	.0111141101	.,						
Location was listed as:			Locatio	n changed	d to:					
Section-Township-Range:	25 - 11 S - 4E		30 - 11 S - 5 E							
Fraction (¼ ¼ ¼):					····					
Other changes: Initial statements:										
Changed to:							· · · · · · · · · · · · · · · · · · ·			
Comments:										
Verification method: Recived en	sail from Georg	County H	ealth '	Departm	ent					
				initi	als: _	<u>'n</u> d	ate:	4/28/	14	
Submitted by: Kansas Geological Surv to: Kansas Dept of Health & Environn	vey, Data Resources Lib nent, Bureau of Water, 1	rary, 1930 Consta 000 SW Jackson	ant Ave., , Suite 4	, Lawrence 20, Topek	e, KS 6 a, KS	66047-3 66612-	3726 1367.			

WATER WELL RECORD	Form WWC-5	5	Division of Water	er Resources; App. No.							
1 LOCATION OF WATER WELL: County: GEARY	Fraction NE4 SW 1/4 SV	V 1/4	Section Number	Township Number T / S	Range Number R 4 EW						
Distance and direction from nearest town or co	ty street address of we	ll if (		g Systems (decimal deg							
located within city? FROM JUNGTON CITY:	2 MFLRS NO FUTH		Latitude:								
3 3/4 WRST			Longitude:								
2 WATER WELL OWNER: ADAM LITZING ER RR#, St. Address, Box # : 19 N. KAW			Elevation:								
City, State, ZIP Code : TIAKTTANIA			Datum:								
V 01000 7000	974, KS. 6644/		Data Collection								
3 LOCATE WELL'S 4 DEPTH OF COM	PLETED WELL	/.0.4	<b>?</b> ft	•							
LOCATION WITH AN "X" IN Depth(s) Groundwater	Encountered (1)	57	ft (2)	- ft (3)	ft						
SECTION BOX: WELL'S STATIC WA											
N Pump test data											
Est. Yield											
WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well											
W         E   Domestic 3 Fee	edlot 6 Oil field										
2 Irrigation 4 Inc	lustrial 7 Domestic	(lawn &	garden) 10 Mo	nitoring well							
Was a chemical/bacter	riological sample subm	itted to E	Department? Yes	No <b>X</b> :	If ves. mo/day/vrs						
Sample was submitted		Water	well disinfected?	Yes No							
S				, ,							
5 TYPE OF CASING USED: 5 Wrought	Iron 8 Concr	ete tile	CASIN	G JOINTS: Glued	Clamped						
1 Steel 3 RMP (SR) 6 Asbestos	-Cement 9 Other	(specify	below)		·····						
				Threaded							
PVC 4 ABS 7 Fiberglas Blank casing diameter in. to in. to	ft., Diameter. 5	ir	1. to ft.	, Diameter	in. toft.						
Casing height above land surface	in., Weight	<del></del> ll	bs./ft. Wall thi	ckness or guage No.	D. 14.4.						
TYPE OF SCREEN OR PERFORATION MATE 1 Steel 3 Stainless Steel 5 Fibe	erial: rglass 7 PVC	Ο Λ	RS	11 Other (Specify)							
2 Brass 4 Galvanized Steal 6 Cond	crete tile 8 RM (SR)	10 A	sbestos-Cement								
SCREEN OR PERFORATION OPENINGS ARI				(- <b>r</b>	/						
	Gauzed wrapped 7 To										
2 Louvered shutter 4 Key punched 6 V	Vire wrapped 8 Sa	aw Cut	10 Other (speci	fy)							
SCREEN-PERFORATED INTERVALS: From.		6.4	ft., From	<del></del> ft. to	ft.						
GRAVEL PACK INTERVALS: From.	9.2 ft. to	102	ft From	ft. to							
From.	ft. to		ft., From	ft. to							
		D IMM									
6 GROUT MATERIAL: 1 Neat cement 2	Cement grout Ben	tonite	4 Other								
Grout Intervals: From 3 ft. to 2 What is the nearest source of possible contamina		1	rt. to	tt., From	It. toIt.						
1 Septic tank 4 Lateral lines		0 Livesto	ck nens 13 In	secticide Storage	6 Other (specify						
2 Sewer lines 5 Cess pool	2 4	Fuel sto	•	bandoned water well	below)						
3 Watertight sewer lines 6 Seepage pit			_		VEW CONTL.						
Direction from well?			feet?								
FROM TO LITHOLOGIC	CLOG	FROM	TO	PLUGGING INT	ERVALS						
O, 13 CLAY, BROWN											
13 18 LIMPSTONE											
18 47 SHALE CRAY	^										
47 52 LEMBSTONK, 42	<u>o</u>		<del> </del>								
74 77 SHALK COLAY	-										
77 100 2HAIR GRAY											
7700 -77000											
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) and this record is true to the best of my knowledge and belief.											
Kansas Water Well Contractor's License No. 7.60 This Water Well Record was completed on (mo/day/year) 2/3/0/ by (signature)											
under the business name of <b>#5</b> Socration INSTRUCTIONS: Use typewriter or ball point pen. <u>PLE</u> ,	ASE PRESS FIRMLY and PI	Dy RINT clearl	v. Please fill in blank	is, underline or circle the co	prrect answers. Send ton						
three copies to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, 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.											

Subject: Re: Fwd: WWC-5 LITZINGER

From: Data Resources Library <datares@kgs.ku.edu>

Date: 4/25/2014 8:43 AM

**To:** "Lisa Davies" < Idavies@gcphd.org> **CC:** datares < datares@kgs.ku.edu>

Lisa,

Thank you for notifying us of the error. We will pull the completion form and correct the location; if we have questions, we will contact you.

## **Deb Stewart**

Data Resources Library Kansas Geological Survey 1930 Constant Ave Lawrence KS 66047-3724 datares@kgs.ku.edu 785-864-2161 Fax 785-864-5317

http://www.kgs.ku.edu/

for pricing and services: <a href="http://www.kgs.ku.edu/General/dataLib.html">http://www.kgs.ku.edu/General/dataLib.html</a>

On 4/24/2014 2:57 PM, Dana Adkins-Heljeson wrote:

Begin forwarded message:

From: "Lisa Davies" < <a href="mailto:ldavies@gcphd.org">ldavies@gcphd.org</a>
Date: April 24, 2014 at 1:50:29 PM CDT

To: < webadmin@kgs.ku.edu>
Subject: WWC-5 LITZINGER

In researching records for a property inspection  $-\mathrm{I}$  found that this well is incorrectly logged.

The correct legal information is: S30 T11S R5E GEARY COUNTY.

Please let me know if you will need further information.

Lisa R. Davies RS/REHS
Director - Environmental Health
Geary County Health Department
P O Box 282
Junction City, KS 66441
785-762-5788
Idavies@gcphd.org