

CORRECTION(S) TO WATER WELL RECORD (WWC-5)
(to rectify lacking or incorrect information)

Location listed as:

Section-Township-Range: 11S-5E

Fraction ($\frac{1}{4}$ $\frac{1}{4}$ $\frac{1}{4}$): None Given

County: Riley

Location changed to:

1-11S-5E

SE SW NE SW

Other changes: Initial statements: _____

Changed to: _____

Comments: _____

verification method: Latitude & longitude, KGS' "LEO" conversion tool,
and mapping tool on KGS website.

initials: DRL date: 7/13/2010

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 WELL RECORD

Form WWC-5

Division of Water Resources App. No.

1 LOCATION OF WATER WELL: County: RILEY		Fraction <div style="display: flex; justify-content: space-around;">1/41/41/41/4</div>		Section Number	Township No. T 11 S	Range Number R 5 <input checked="" type="checkbox"/> E <input type="checkbox"/> W				
Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here <input type="checkbox"/> FORT RILEY, KS MILITARY BASE, RILEY COUNTY KS MILITARY COORDINATES 1645600E, 289200N				Global Positioning System (GPS) information: Latitude: 39.1211..... (in decimal degrees) Longitude: -96.8263..... (in decimal degrees) Elevation: Datum: <input type="checkbox"/> WGS 84, <input type="checkbox"/> NAD 83, <input type="checkbox"/> NAD 27 Collection Method: <input type="checkbox"/> GPS unit (Make/Model:) <input type="checkbox"/> Digital Map/Photo, <input type="checkbox"/> Topographic Map, <input type="checkbox"/> Land Survey Est. Accuracy: <input type="checkbox"/> <3 m, <input type="checkbox"/> 3-5 m, <input type="checkbox"/> 5-15 m, <input type="checkbox"/> >15 m						
2 WATER WELL OWNER: USARMYCORPSENG.KC DIST RR#, Street Address, Box #: FED BUILD 601 E 12TH RM757 City, State, ZIP Code : KANSAS CITY, MO 64106-2896										
3 LOCATE WELL WITH AN "X" IN SECTION BOX: <div style="text-align: center;">N</div> <table border="1" style="margin: auto; border-collapse: collapse;"> <tr> <td style="padding: 5px;">NW</td> <td style="padding: 5px;">NE</td> </tr> <tr> <td style="padding: 5px;">SW</td> <td style="padding: 5px;">SE</td> </tr> </table> <div style="text-align: center;">S</div> <div style="text-align: center;">-----1 mile-----</div>		NW	NE	SW	SE	4 DEPTH OF COMPLETED WELL 307 ft. Depth(s) Groundwater Encountered (1) N/A..... ft. (2) N/A..... ft. (3) N/A..... ft. WELL'S STATIC WATER LEVEL..... ft. below land surface measured on mo/day/yr..... Pump test data: Well water was..... ft. after..... hours pumping..... gpm EST. YIELD..... gpm. Well water was..... ft. after..... hours pumping..... gpm Bore Hole Diameter..... in. to..... ft., and..... in. to..... ft. WELL WATER TO BE USED AS: <input type="checkbox"/> Public water supply <input checked="" type="checkbox"/> Geothermal <input type="checkbox"/> Injection well <input type="checkbox"/> Domestic <input type="checkbox"/> Feedlot <input type="checkbox"/> Oil field water supply <input type="checkbox"/> Dewatering <input type="checkbox"/> Other (Specify below) <input type="checkbox"/> Irrigation <input type="checkbox"/> Industrial <input type="checkbox"/> Domestic-lawn & garden <input type="checkbox"/> Monitoring well Was a chemical/bacteriological sample submitted to Department? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, mo/day/yr sample was submitted..... Water well disinfected? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
NW	NE									
SW	SE									
5 TYPE OF CASING USED: <input type="checkbox"/> Steel <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Other 1" GEO. POLY. LOOP CASING JOINTS: <input type="checkbox"/> Glued <input type="checkbox"/> Clamped <input type="checkbox"/> Welded <input type="checkbox"/> Threaded Casing diameter..... in. to..... ft., Diameter..... in. to..... ft., Diameter..... in. to..... ft. Casing height above land surface..... in., Weight..... lbs./ft., Wall thickness or gauge No. TYPE OF SCREEN OR PERFORATION MATERIAL: <input type="checkbox"/> Steel <input type="checkbox"/> Stainless Steel <input type="checkbox"/> PVC <input type="checkbox"/> Other (Specify) <input type="checkbox"/> Brass <input type="checkbox"/> Galvanized Steel <input type="checkbox"/> None used (open hole) SCREEN OR PERFORATION OPENINGS ARE: <input type="checkbox"/> Continuous slot <input type="checkbox"/> Mill slot <input type="checkbox"/> Gauze wrapped <input type="checkbox"/> Torch cut <input type="checkbox"/> Drilled holes <input type="checkbox"/> None (open hole) <input type="checkbox"/> Louvered shutter <input type="checkbox"/> Key punched <input type="checkbox"/> Wire wrapped <input type="checkbox"/> Saw cut <input type="checkbox"/> Other (specify) SCREEN-PERFORATED INTERVALS: From..... ft. to..... ft., From..... ft. to..... ft. From..... ft. to..... ft., From..... ft. to..... ft. GRAVEL PACK INTERVALS: From..... ft. to..... ft., From..... ft. to..... ft. From..... ft. to..... ft., From..... ft. to..... ft.										
6 GROUT MATERIAL: <input type="checkbox"/> Neat cement <input type="checkbox"/> Cement grout <input type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Other CETCO HTC WITH SILICA SAND Grout Intervals: From 0..... ft. to 307..... ft., From..... ft. to..... ft., From..... ft. to..... ft. What is the nearest source of possible contamination: <input type="checkbox"/> Septic tank <input type="checkbox"/> Lateral lines <input type="checkbox"/> Pit privy <input type="checkbox"/> Livestock pens <input type="checkbox"/> Insecticide storage <input type="checkbox"/> Other (specify below) <input type="checkbox"/> Sewer lines <input type="checkbox"/> Cesspool <input type="checkbox"/> Sewage lagoon <input type="checkbox"/> Fuel storage <input type="checkbox"/> Abandoned water well <input type="checkbox"/> Watertight sewer lines <input type="checkbox"/> Seepage pit <input type="checkbox"/> Feedyard <input type="checkbox"/> Fertilizer storage <input type="checkbox"/> Oil well/gas well NOTHIN/OPEN LAND Direction from well..... Distance from well.....										
FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS					
0	24	CLAY, LIMESTONE, SAND			CETCO GEOTHERMAL GROUT W/ SILICA					
24	30	SAND, LIMESTONE			SAND FILLED FROM BOTTOM TO SURFACE					
30	100	FORT RILEY LIMESTONE & CHERT								
100	105	SAND			Possible water sand zones					
105	125	RED CLAY W/ FORT RILEY LIMESTONE			Sands were noted at 20'-6" sand,					
125	175	FORT RILEY LIMESTONE & CHERT			30'-1" sand & 100'-2" sand					
175	190	SHALE								
190	250	FORT RILEY LIMESTONE & CHERT								
250	255	SHALE								
255	307	FORT HAYS LIMESTONE & CHERT								
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was <input checked="" type="checkbox"/> constructed, <input type="checkbox"/> reconstructed, or <input type="checkbox"/> plugged under my jurisdiction and was completed on (mo/day/year) 5/25-6/8/10.... and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 807..... This Water Well Record was completed on (mo/day/year) 6/11/10..... under the business name of PRECISION DRILLING, LLC..... by (signature) <i>[Signature]</i>										
INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks and check the correct answers. Send three copies (white, blue, pink) 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 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 .										