

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

County: Shawnee

Location listed as:

Section-Township-Range: 13-12S-13E

Fraction (1/4 1/4 1/4): SW NE SW

Location changed to:

18-12S-14E

NW NW NE SW

Other changes: Initial statements: _____

Changed to: _____

Comments: _____

verification method: Latitude & longitude, KGS' "LEO" conversion tool,
and mapping tool & aerial photos & topo. map on KGS
website. initials: DRB date: 12/01/2008

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.

WATER WELL RECORD

Form WWC-5

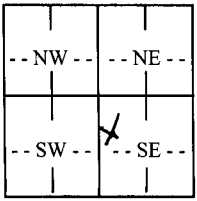
Division of Water Resources; App. No.

1 LOCATION OF WATER WELL: County: <u>Shawnee</u>	Fraction <u>SW 1/4 NE 1/4 SW 1/4</u>	Section Number <u>13</u>	Township Number <u>T 12 S</u>	Range Number <u>R 13 E</u>
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Distance and direction from nearest town or city street address of well if located within city? 2 miles N of Dover

Global Positioning Systems (decimal degrees, min. of 4 digits)
 Latitude: N 39.0068459
 Longitude: W 95.903864
 Elevation: 1031
 Datum: _____
 Data Collection Method: Hand held unit

2 WATER WELL OWNER: John Knight
 RR#, St. Address, Box # : 12830 SW 33rd St
 City, State, ZIP Code : Topeka, KS. 66614-9729

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: N  S	4 DEPTH OF COMPLETED WELL <u>110</u> ft. Depth(s) Groundwater Encountered (1)..... <u>97</u> ft. (2)..... ft. (3)..... ft. WELL'S STATIC WATER LEVEL..... <u>30</u> ft. below land surface measured on mo/day/yr..... Pump test data: Well water was..... ft. after..... hours pumping..... gpm Est. Yield. <u>3</u> gpm: Well water was..... ft. after..... hours pumping..... gpm WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well 1 <u>Domestic</u> 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below) 2 Irrigation 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well Was a chemical/bacteriological sample submitted to Department? Yes..... No <input checked="" type="checkbox"/>; If yes, mo/day/yr Sample was submitted..... Water well disinfected? Yes <input checked="" type="checkbox"/> No.....
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5 TYPE OF CASING USED: 5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued. Clamped.....
 1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded.....
2 PVC 4 ABS 7 Fiberglass Threaded.....
 Blank casing diameter 5 in. to 80 ft., Diameter 5 in. to 110 ft., Diameter in. to ft.
 Casing height above land surface..... 18 in., Weight 220 PSI lbs./ft. Wall thickness or gauge No. SDR 21
TYPE OF SCREEN OR PERFORATION MATERIAL:
 1 Steel 3 Stainless Steel 5 Fiberglass 7 PVC 9 ABS 11 Other (Specify)
 2 Brass 4 Galvanized Steel 6 Concrete tile 8 RM (SR) 10 Asbestos-Cement 12 None used (open hole)
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)
SCREEN-PERFORATED INTERVALS: From..... 80 ft. to 100 ft., From ft. to ft.
 From..... ft. to ft., From ft. to ft.
GRAVEL PACK INTERVALS: From..... 25 ft. to 110 ft., From ft. to ft.
 From..... ft. to ft., From ft. to ft.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other
 Grout Intervals: From 0 ft. to 25 ft., From ft. to ft., From ft. to ft.
 What is the nearest source of possible contamination:
 1 Septic tank 4 Lateral lines 7 Pit privy 10 Livestock pens 13 Insecticide Storage 16 Other (specify below)
 2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 14 Abandoned water well
 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer Storage 15 Oil well/gas well

Direction from well? <u>None yet</u>		How many feet? <u>None yet</u>	
FROM	TO	LITHOLOGIC LOG	PLUGGING INTERVALS
0	5	Clay & broken rock	
5	15	Sandstone	
15	25	Shale	
25	30	Limestone	
30	62	Shale	
62	77	Limestone	
77	90	Shale	
90	97	Sandstone	
97	110	Shale	

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) 8/15/08 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 592..... This Water Well Record was completed on (mo/day/year) 9/22/08 under the business name of Steve Youakum Well Drilling by (signature) [Signature]

INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks, underline or circle the correct answers. Send top 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>.