County: Dickinson Fraction NE NE NW NA	Sec. 6 T /2 S R 2 EW
CORRECTION(S) TO WATER WELL COM (to rectify lacking or incorrec Owner:	PLETION RECORD (WWC-5) t information)
Location was listed as:	Location changed to:
Section-Township-Range: 6-125-2W Fraction (1/4 1/4 1/4): NE NE NW NE	6-125-2E
Fraction (1/4 1/4 1/4): NE NW NE	NE NE NW NE
Other changes: Initial statements:	
Changed to:	
Comments:	
Verification method: Latitude & longitude Dickinson County on line parc & aeria photos on KGS well Submitted by: Kansas Geological Survey, Data Resources Library, 1930 Cto: Kansas Dept of Health & Environment, Bureau of Water, 1000 SW Jac	Mistalite 1110., Ela Mistalite, 123 000 1. 0. 20

WATER WELL RECORD		Form W	WC-5	D	ivision of Wate	r Resources App. N	o. L			
Cour	ıty: Dic		Fraction NE 1/4 NE 1/4 NW			ion Number 6	Township No. T 12 S	Range Number R 2 ☐E ☑W		
	Street/Rural Address of Well Location; if unknown, distance & direction						Global Positioning System (GPS) information:			
from	from nearest town or intersection: If at owner's address, check here					Latitude: .39.045581 (in decimal degrees)				
2 miles East of Bennington, Ks.				Eleva	Longitude: 97.247134 (in decimal degrees) Elevation: 1250					
2 WA	TED W	ELL OWNED					4, 🗹 NAD 83, 🗀] NAD 27		
Lany Damurst						Collection Method:				
C'a Cara Zin Cal				片	☐ GPS unit (Make/Model:) ☐ Digital Map/Photo, ☐ Topographic Map, ☐ Land Survey					
		Abliene.	Kansas 67410 ☐ Digital Map/Photo, ☐ Topograp Est. Accuracy: ☐ <3 m, ☐ 3-5 m, [3 m, 3-5 m,	5-15 m, >15 m		
3 LOC		LL A DEPENDEN	OOLENE POPPO MINE	- 70						
1	H AN "X		COMPLETED WEL				_			
SEC	FION BO	Depth(s) Groundwater Encountered (1)								
<u> </u>		WELL'S STATIC WATER LEVEL44								
'	X	POT VIELD 40	test data: Well wate	r was	nn	t. after	hours pum	ping gpm		
	V N	EST. TIELD	l-1gpm. Well water	r was	лп	ι. aπer	hours pum	ping gpm		
W			eterin. to TO BE USED AS:							
'		□ Domondio						Other (Specify below)		
SV	V S	lrrigation								
			bacteriological sample	cubmitted:	to Denar		Vec Main	• • • • • • • • • • • • • • • • • • • •		
	S		day/yr sample was sub				ies Fino			
 	1 mile	Water well disin	fected? 🔽 Yes 📋	No	*******	•••••		·		
5 TYPI	E OF CA	ASING USED: Steel				*************************	••••			
CASIN	G JOIN	ΓS: 🗹 Glued 🔲 Clan	nped 🗍 Welded	☐ Threade	ed					
Casin	g diamet	ter5 in. to58	ft., Diameter	in	. to	ft., D	iameter	in. to ft.		
Casin	g height	above land surface!	Weight		lb s./f	ft., Wall thic	kness or gauge N	o		
TYPE	OF SCRI	EEN OR PERFORATION	MATERIAL:							
• =	Steel	Stainless Steel	Z PVC		Other (Specify)				
_	Brass	Galvanized Steel		ole)						
		ERFORATION OPENING		7 m 1 .		.,, ., ,		,		
l H	Louvere	ous slot Mill slot	U Wire verspred	J Forch cut		illed holes	None (open hol	e)		
SCREE	N-PERF	ORATED INTERVALS:	From 58	Jancul Ato 78		f From	A :	to A		
001122	Lid	ordinad in this villo.	From	ft to		ft From	ብ :	to #		
From						to #				
								to ft.		
6 GRO	UT MA	TERIAL: Neat ceme	nt	Bento	onite F	Other				
Grout In	tervals:	From .0 ft. to		1	. ft. to	ft.,	From	ft. toft.		
What is	the near	est source of possible conta	mination:							
Septic tank										
	Sewer lin		_ ~ ~ .	Fuel stora	_	Abandoned water well				
		ht sewer lines Scepage p n well North	it Feedyard [Fertilizer:		Oil well/ga		••••••		
FROM	TO	LITHOLOG	IC LOC	FROM	TO TO			GGING INTERVALS		
0	2	Topsoil	10 100	TROW	10	Litho. tx	M (cont.) of PLO	OUING INTERVALS		
2	6	Clav				 				
6	22	Shale, gray								
22	22.5	Hard formation								
22.5	77	Shale, gray	**************************************			<u> </u>				
77	77.5	Fracture/loose rock				-				
77.5	100	Shale, gray								
	100	oralo, gray								
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was 🗸 constructed, 🗌 reconstructed, or 🗌 plugged										
under my jurisdiction and was completed on (mo/day/year) .2/16/2015 and this record is true to the best of my knowledge and belief.										
Kansas Water Well Contractor's License No. 897. This Water Well Record was completed on (mo/day/year) 2/20/2015										
under the business name of Peterson McNett Drilling by (signature) and Instructions: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks and check the correct answers. Send one copy to										
INSTRUC	LIONS: Kansas D	Use typewriter or ball point pen	PLEASE PRESS FIRMLY	and <u>PRINT</u> c	icarly. Pie	ase fill in blanke	and check the correct	answers. Send one copy to		
Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5524. 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										