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

(to rectify lacking or incorrect information)

Location listed as:	Location changed to:
Section-Township-Range: 19-12 5-20 E	19-125-20E
Fraction (1/4 1/4 1/4): SW SE	19-125-20E SW SE SE SW
Other changes: Initial statements:	
Changed to:	
Comments:	
verification method: <u>Wellsite add ress</u> , cit Earth, and mapping tool & aer website. submitted by: Kansas Geological Survey, Data Resources Library, 1930 Con	,

to: Kansas Dept of Health & Environment, Bureau of Water, 1000 SW Jackson, Suite 420, Topeka, KS 66612-1367.

WATER W	ELL RE	CORD	For	m WWC	:-5 D	ivision of W	ater Reso	ources: Ap	pp. No.			
1 LOCATIO	N OF WA	TER WELL:	Fraction	41. 1		Section N	umber	Towns	hip Number	Ra	inge Nu	mber
County: Distance and d	Dou	glas	15W%	<u> 5W //</u>	5t 1/4			T	1Z s	R	20	<u>E</u> w
located within	city?	903 N. 2 nd S	n or city stre St Lawren	ce. KS	or well if	Latitude:	sitionin; N°	g Systen	i (decimai de	grees,	min. of 4	digits)
	•••,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Jul, 24 17 1 011	CC, 1 LD		Longitude	e: W°					
2 WATER V			ard Zeller			Elevation	:					
RR#, St. Ac					i	Datum:	abov	e mean	sea level			
City, State,	ZIP Code	E DEPOTE O	ECOMBI	EMED 11/E		Data Coll	ection N	Method:	legal surve			
3 LOCATE LOCATOR	WELL'S	4 DEPIH O	F COMPL	EIED WE	<u> </u>	<u> </u>		n.				
WITH AN	" "Y" IN	Denth(s) Grou	ındıyatar Er	acumtered	1	ASS	£ 2		A 3	2		
SECTION	ROY:	Depth(s) Grou WELL'S STA	TIC WATER	ED I EVEI	1	ft below la	nd curf	oce mess	urad on mo	, /daz/z		π.
SECTION	DOA.	Pur	nn test data:	IX LE VEL teur llaW	er wae	fi. Delow la	after	ace meas	hours num	uay/y/		
		Pun Est. Yield	ip iesi data.	Well wat	er was	1t. fi	after		hours num	ning -		gpm
	_ NE	WELL WAT	FR TO BE I	ISFD AS:	5 Public v	vater sunnly	2 8 A	r conditi	oning 11	Injecti	on well	gpm
1 1 1		1 Domestic	Feed lot	6 Oil fiel	d water sin	vater suppry	9 Dew	n conditi atering	12 Ot	her (S	necify b	elow)
w	 E	2 Irrigation	4 Industrial	7 Domes	tic (lawn &	garden) (10 Mon	itoring v	vell	1101 (10	peeny	ciowy
-sw-	- sk			. 2011140	(14.711 4	, g, ,	O o					
S, x		Was a chemic	al/bacteriol	ogical samı	ole submitt	ed to Depar	rtment?	Yes	No X	: If ve	s. mo/da	av/vrs
S		Sample was s										
5 TYPE OF	CASING	HSED. 5	Wrought	Iron	8 Cono	rete tile	CAS	ING IO	NTC: Glue	4	Clamp	
1 Steel	CASING 2 D	LMP (SR)	A sheetos	Coment	0 Other	(specify be	CAS	IOC DAIL	Wale	u 10d	Clampe	;u
2 PVC	1 A	ABS 7	/ Fiberglace	Cement	9 Oulei	(specify be	iow)		Three	adad	·v	
Blank casing d	iameter	2 in to	71 5	ft Dia	2	in to 24	L-25 ft	Dia	Thre	aucu -	A	- -
Blank casing d	elow land	surface flush	mount ft	Weight		lhe. In Land	/ft Wa	ll thickn	es or gauge	No -		11.
TYPE OF SCR	EEN OR	PERFORATIO	N MATER	Weight IAL:		103.	./IL. Wa	II UIICKII	ess of gauge	140.		
1 Steel	3 Stainles	s steel 5 F	iberglass	(7) PVC	9	ABS		11 Ot	her (specify)		
TYPE OF SCR 1 Steel 2 Brass	4 Galvani	zed steel 6 C	concrete tile	8 RM (S	SR) 10	Asbestos-C	ement	12 No	ne used (op	en hol	e)	
1 Continu 2 Louver SCREEN-PER GRAVE	ous siot	Key nunch	ned 6 Wi	uze wrappe	101 / 101 1 8 Say	cn cut	10 Othe	led noies er (specif	ion II	e (ope	n noie)	
SCREEN-PER	FORATE	INTERVAL	S: From	21.5	flo	24	ft. Fr	om	ا	to		-
			From		ft. to		ft. Fr	om	ft.	to		ft.
GRAVE	L PACK	NTERVALS:	From	19.5	ft. to	25	ft. Fr	om	ft.	to		ft.
			From		ft. to		ft. Fr	om	ft.	to		ft.
6 CPOUT N	TATEDIA	I · 1 Neat ce	ment 2 C	ement grou	ıt G Rer	tonite	4)Other	Concre	to: 0-3.5			
6 GROUT M Grout Intervals	From	25 A t	105 f	From		t to	+)Ouici	From	ie. 0-3.5	A +		-
What is the nex	rest sourc	e of possible co	ontamination	n.			16.	riom	•••••	IL. U		11.
1 Septic ta			lines 7 Pit		10 Lives	tock pens	13 Ins	ecticide :	Storage	16	Other (s	pecify
2 Sewer lin		5 Cess po		age lagoon					water well		below)	,
3 Watertig	ht sewer li	nes 6 Seepage				izer storage	15 Oil	well/ ga	s well			
Direction from	well?		- 	-	How ma	ny feet?						
FROM	0	LITHO	DLOGIC LO	OG.	FRO	M TO	T	PLU	GGING IN	ERV	ALS	
		halt with grav					1					
0.3		wn silty clays			0							
	odo					DDF	OTI	-p [RECEIL	ÆD.		
3		very fine sand				KKE	UI	- U_		<u></u>		
9		y, moist, very odor, strong hy					-	N	AY 1 1 :	2009		
	110	odor, strong ny	di ocai boli (Juoi at 12 1			 			.009		
			• • • • • • • • • • • • • • • • • • • •				1	BUR	EAU OF V	/ATE	· D	
												
7 CONTRAC												
		as completed on			1/24/08 Water Well				he best of my	knowl 3/18/0	_	i deller.
Kansas Water Well Contractor's License No. 757 . This Water Well Record was completed on (mo/day/year) 3/18/09 under the business name of Larsen & Associates, Inc. by (signature)												
INSTRUCTIONS: Please fill in blanks or circle the correct answers. Send top three copies to Kansas Deputing 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.												
Geology Section.	1000 SW Jac	kson St., Suite 420	. Topeka, Kan	sas 66612-136	57. Telephon	785-296-552	2. Send	ne to WA	ER WELL O	VNER	and retain	one for
your records. Fee	of \$5.00 for	each constructed w	eil. Visit us a	t http://www.k	(dneks.gov/w	aterwell.	-					