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

(to rectify lacking or incorrect information)

Location listed as:	County: Sohn Son  Location changed to:
Section-Township-Range: 20-12 5-24 E	20-125-24E
Fraction ( 1/4 1/4 1/4):	20-125-24E NW NE NE
Other changes: Initial statements:	
Changed to:	·
Comments:	
verification method: Corrections submitted to	o KDHE by well contractor,
well owner's address, city si \$ aerial photos on Kas web	treet map, and mapping too
submitted by: Kansas Geological Survey, Data Resources Library, 1930 Co	

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

WATER	WELL	RECORD	Form WWC-5	5	Division	of Water	r Resources; App. No.			
I LOCATION OF WATER WELL:		Fraction			ımber	Township Number				
			SW <sub>v4</sub> NW <sub>v4</sub> NE		20 T 12 S R 24					
Distance and direction from nearest town or city street address of well if located within city?					Global Positioning Systems (decimal degrees, min. of 4 digits)  Latitude:————————————————————————————————————					
15320 Midland Drive, Shawnee, KS					Longitude:					
2 WATER WELL OWNER: McAnany Construction, Inc.				Elevation:						
RR#, St. Address, Box # 15320 Midland Drive					Datum:					
City, State, ZIP Code Shawnee, KS 66217-9605					Data Collection Method:					
3 LOCATE WELL'S   4 DEPTH OF COMPLETED WELL 25						ft.				
	LOCATION									
	VITH AN "X" IN ECTION BOX: Depth(s) Groundwater Encountered (1) ft. (2) ft. (3) ft. WELL'S STATIC WATER LEVEL 21.95 ft. below land surface measured on mo/day/yr 4-24-07									
SECI	N ION BOX									
Est. Yield gpm: Well water was ft. after hours pumping gpm										
NW	WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well									
w		E   I Domestic 3 Fee								
		2 Irrigation 4 Indu								
sv	v SE-	- Was a chemical/bacte	riological sample subn	nitted to	Departmen	it'? Yes	No X	If yes, mo/dav/vrs		
		Sample was submitted	riological sample subn	Wate	er well disi	nfected?	Yes No X			
	S									
5 TYPE	OF CASI	NG USED: 5 Wrought	Iron 8 Conce	rete tile		CASIN	G JOINTS: Glued	Clamped		
1	teel	3 RMP (SR) 6 Asbestos	-Cement 9 Other	(specify	below)		Welded Threade	ı X		
$\left  \frac{2}{3} \right $	VC 🖁	ABS 7 Fiberglas in. to 15 e land surface	S		in to		Diameter	in to $\theta$		
Casing b	ising diame	e land surface	in., Weight		lbs./ft. W	all thick	kness or guage No.	SCH40		
TYPE O	F SCREEN	N OR PERFORATION MATE	ERIAL:							
15	Steel	3 Stainless Steel 5 Fibe	rglass (7) VC							
	Brass			) 10	Asbestos-C	ement	12 None used (ope	n hole)		
SCREE	OR PER	FORATION OPENINGS AR	E: Guazed wranned - 7 T	orch cu	t 9 Drillec	l holes	I I None (open h	nole)		
I Continuous slot 3 Mill slot 5 Guazed wrapped 7 Torch cut 9 Drilled holes I I None (open hole)  2 Louvered shutter 4 Key punched 6 Wire wrapped 8 Şaw Cut 10 Other (specify)										
SCREE	N-PERFOR	RATED INTERVALS: From	25 ft. to 1	3	ft.,	From	ft. to	ft.		
		From PACK INTERVALS: From	25 ft. to	14	ft.,	From	ft. to .	ft.		
	GRAVEL	PACK INTERVALS: From	23 ft. to ft. to		ft.,	From	ft. to	ft.		
					_					
6 GRO	UT MATE	CRIAL: I Neat cement 2	Cement grou 3 Pen	tonite	4 Other	ement				
Grout In	tervals:	From 14 ft. to 1	ft., From		ft. to	1	ft., From	ft. to ft.		
1		source of possible contamina 4 Lateral lines		I () Lives	tock pens	13 In	secticide Storage	16 Other (specify		
1 2	Septic tank Sewer line	5 Cass pool	8 Sewage lagoon I	I I Fuel s			bandoned water well	. ,		
3	Watertigh	t sewer lines 6 Seepage pit	9 Feedyard	12 Fertil	izer Storag	re 15 Oi	l well/gas well	UST		
Directio	n from wel	t sewer lines 6 Seepage pit 1? Immediate vicinity	F	low mar	ny feet? Im	mediate	vicinity			
FROM	TO	LITHOLOGI	C LOG	FROM		10/20 0	PLUGGING IN	TERVALS		
0	0.5	Grass, topsoil	wn stiff	25	14	10/20 S	sand ntonite chips			
0.5	5	Clay with trace silt, dark bro Clay with trace silt, dark bro		14	0	Cemen				
5	7	Clay with trace silt, light bro		1		Comen				
7	12	Dark damp clay, high plastic		*						
12	17	Light brown clay, moist, hig		1						
17	25	Light brown clay, moist, high plastic, be				MW-5				
7 CONT	TD ACTOR	OR LANDOWNER'S CE	RTIFICATION: This	water w	ell was (1)	onstru	icted (2) reconstruct	ted or (3) nlugged		
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) 4-23-07 and this record is true to the best of my knowledge and belief.										
Kansas Water Well Contractor's License No. 665 This Water Well Record was completed on mortalay/year) 5-25-67										
under th	e husiness	name of Pratt Well Environ	mental	t t	y (signatu	re)	Juin	c. Gell		
three coni	ies to Kansas	the typewriter or ball point pen. <u>PLE.</u> Department of Health and Environment	ent. Bureau of Water, Geolo	gy Section	i, 1 000 SW Ja	ickson St.	Suite 420, Topeka, Kansa	s 66612-1 367. Telephone		
785-296-5522. Send one to WATER WELL 0WNER and retain one for your records. Fee of \$5.00 for each constructed well. Visit us at http://www.kdhe.state.ks.us/geo/waterwells.										
http://ww	w.kdhe.state.	ks.us/geo/waterwells.								

KSA 82a-1212