County: Dickinson Fraction NE NE SE	Sec <u>30</u> T <u>/2</u> SR E / W
CORRECTION(S) TO WATER WELL COMP (to rectify lacking or incorrect Owner: Chapman Valley Manor	
Location was listed as:	Location changed to:
Section-Township-Range: 30-125-4E	30-125-4E
Fraction (1/4 1/4 1/4): None Given	NE NE SE
Other changes: Initial statements:	
Changed to:	
Comments:	
Verification method: Wellsite address, Ci	ty street map, and
Verification method: Wellsite address, Ci mapping tool # aerial photos Submitted by: Kansas Geological Survey Data Resources Library, 1930 Con	initials: ARJ date: 11/20/2014
Submitted by: Kansas Geological Survey, Data Resources Library, 1930 Corto: Kansas Dept of Health & Environment, Bureau of Water, 1000 SW Jacks	iistaiit Avc., Lawrence, KS 00047-3720

Your Copy								
WATER WELL RI		WWC-5		sion of Water				
Original Record		ge in Well Use Fraction		urces App. No. ion_Number	Township Number	Well ID Range Number		
1 LOCATION OF WA		1/4 1/4 1/4		30	T 23	R 4		
2 WELL OWNER: Last Name: First: Street or Rural Address where well is located (if unknown, distance and								
Business: The same Vally Manor direction from nearest town or intersection): If at owner's address, check here: Address: Address:								
		- L71121						
City: Chapman	State: /C3	ZIP:67431	100/	<u> </u>				
3 LOCATE WELL WITH "X" IN	4 DEPTH OF CON	IPLETED WELL:	<i>[.D.O.</i> ft.	I		(decimal degrees)		
SECTION BOX:	Depth(s) Groundwater Encountered: 1)							
N	2)					83 NAD 21		
		, measured on (mo-day-)		
NW NE		, measured on (mo-day-			(WAAS enabled?			
X	, -	vater was fl s pumping			Survey Topograp	hic Map		
W E		vater was f			те тиаррет			
SW SE	after hour	pumping	gpm	6 Elevatio	n· ft	☐ Ground Level ☐ TOC		
S	Estimated Yield: .4.6	gpm . .9 in. to /0.0) ft and			PS Topographic Map		
mile	Bole Hole Diameter	in. to	ft.		Other			
7 WELL WATER TO	BE USED AS:							
1. Domestic:		ater Supply: well ID			ield Water Supply: lea e: well ID	se		
☐ Household ☐ Lawn & Garden		ng: how many wells? echarge: well ID			e: well ID			
Livestock		g: well ID			nal: how many bores?			
2. Irrigation		al Remediation: well ID)	a) Close	d Loop 🔲 Horizontal	l □ Vertical		
3. Feedlot	☐ Air Sparg		Extraction			charge Inj. of Water		
4. Industrial	Recovery		· -					
Was a chemical/bacteri Water well disinfected?		nitted to KDHE!	Yes La No	ir yes, date sa	impie was submitted	:		
8 TYPE OF CASING	USED: Steel PV	C Other	CASIN	IG JOINTS:	Glued Clamped	□ Welded □ Threaded		
Casing diameter5	in. to 80, ft	, Diameter	in. to	ft., Diamete	r in. to	ft.		
8 TYPE OF CASING Casing diameter	urfacei	n. Weight G.M. 4.	⊘ lbs./ft.	Wall thicknes	ss or gauge No			
TYPE OF SCREEN OR	PERFORATION MA less Steel	TERIAL:			(Specify)			
	anized Steel		sed (open hole		(Specify)			
SCREEN OR PERFORA	ATION OPENINGS A	RE:						
☐ Continuous Slot	✓ Mill Slot □ G	auze Wrapped	rch Cut D	rilled Holes	Other (Specify)			
☐ Louvered Shutter SCREEN-PERFORATE	☐ Key Punched ☐ W	Vire Wrapped ☐ Sa	w Cut ∐ N) e Erom	one (Open Hole	e) A From	ft to ft		
GRAVEL PAC	CK INTERVALS: From	n 25 ft to 1/4/	? ft. From	ft. to	ft From	ft. to ft.		
9 GROUT MATERIA	L: Neat cement	Cement grout Be	ntonite 🗆 O	ther				
9 GROUT MATERIA Grout Intervals: From	.5 ft. to . .2.5	ft., From	ft. to	ft., From	ft. to	ft.		
Nearest source of possible	e contamination:	W /Lose						
☐ Septic Tank ☐ Lateral Lines ☐ Pit Privy ☐ Livestock Pens ☐ Insecticide Storage ☐ Sewer Lines ☐ Cess Pool ☐ Sewage Lagoon ☐ Fuel Storage ☐ Abandoned Water Well								
☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well								
Other (Specify) Direction from well? Distance from well? ft.								
Direction from well? 10 FROM TO	LITHOLO		FROM			PLUGGING INTERVALS		
0 1	Tal Sail	GIC LOG	I KOWI	10	TITO. EOG (COIII.) OF I	LUGGING INTERVALS		
1 3	Seedy CLIV							
3 25 "	Villow Show	6						
25 39	Linston							
39 61	ONY Shell	(1. Cattle)						
6/ 77	MANUAL	() WAYIN')	Notes:	l				
64 100	Drown 7 no V		1,0103.			ļ		
87 100 HM111100								
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, or plugged under my jurisdiction and was completed on (mo-day-year)								
under my jurisdiction and was completed on (mo-day-year)								
under the business name	of b.a.l.b.a.a.	Tual Drille				SUPIE		
INSTRUCTIONS: Send one copy to WATER WELL OWNER and retain one copy for year records. Submit fee of \$5.00 for each constructed well along with one (white) copy to Kansas								
Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeda Kansas 66612-1367. Telephone (785) 296-3565. Visit us at http://www.kdheks.gov/waterwell/index.html KSA 82a-1212 Revised 9/10/2012								