| ` , | ORRECTION(S) TO WATER WELL RECORD (WWC-5) (to rectify lacking or incorrect information) | | | |
|--|---|--|--|--|
| Location listed as: | County: Dougla > Location changed to: | | | |
| Section-Township-Range: 7-135-20E | 7-135-20E | | | |
| Section-Township-Range: 7-/35-20E Fraction (½ ¼ ¼): 1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 | NW NW NE | | | |
| Other changes: Initial statements: | | | | |
| Changed to: | | | | |
| Comments: | | | | |
| verification method: Written & legal descripe Nations University, and mapping | tions, map of Haskell Indian | | | |
| 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 | KSA 82a- | | |
|-----------------------|---|--|------------------|-----------------|---|-------------------------------------|
| LOCATION OF WA | | ction | V 1/4 Sec | tion Number | Township Number | |
| County: 1009 | | y street address of well if located | | | T 🗯 13 | S R 20EW |
| | | ege Dorm 2600 Ma | | | wrence KS | ì |
| WATER WELL ON | wner:U.S. Dept. | of Interior Bure | eau of | Indian <i>I</i> | Affairs Fac | ities MGT. Const. |
| RR#, St. Address, Bo | ox # :201 3rd. § | t, Northwest PO | Box 12 | 48 | | ulture, Division of Water Resources |
| City, State, ZIP Code | :Albuquerqu | e, NM 87103 | | | Application Nu | mber: |
| LOCATE WELL'S | LOCATION WITH 4 DEP | TH OF COMPLETED WELL. 2 | 5.0 | . ft. ELEVAT | ION: | |
| AN "X" IN SECTIO | N BOX: Depth(s | Groundwater Encountered | | ft. 2. | | ft. 3 |
| · [| WELL'S | STATIC WATER LEVEL | ft. be | elow land surfa | ace measured on mo | /day/yr |
| † i | | | | | | ours pumping gpm |
| NW | NE Fet Vie | • | | | | ours pumping gpm |
| | 1 | ₹. | | | | in. to |
| ¥ w 1 | | | 5 Public wate | | 3 Air conditioning | 11) Injection well |
| - i | 1 1 1 | | | | Dewatering | |
| SW | .l SE l | | | | | ., |
| ! | | | | | | ; If yes, mo/day/yr sample was sub- |
| <u> </u> | mitted | one mean bacteriological sample s | | | er Well Disinfected? | |
| TYPE OF BLANK | CASING USED: NA | 5 Wrought iron | 8 Concre | | | : Glued Clamped |
| 1 Steel | 3 RMP (SR) | 6 Asbestos-Cement | | (specify below) | | Welded |
| 2 PVC | 4 ABS | 7 Fiberglass | | | | Threaded |
| | | · · | | | | in. to ft. |
| | | | | | | auge No. |
| • • | OR PERFORATION MATE | | 7 PV | | 10 Asbesto | |
| | | 5 Fiberglass | | | | specify) A |
| 1 Steel | 3 Stainless steel | - | 9 AB | | , | sed (open hole) |
| 2 Brass | 4 Galvanized steel | | | 5 | 8 Saw cut | 11 None (open hole) |
| | PRATION OPENINGS ARE | | d wrapped | | 9 Drilled holes | (i None (open noie) |
| 1 Continuous s | | 6 Wire v | | | | NA |
| 2 Louvered shu | • • | n 999 ft to | 999 | 4 | To Other (specify) | /V /4 ft. to |
| SCREEN-PERFORA | | n | | III., From | <i></i> | ft. to |
| ODAVEL D | | | | | | . ft. to |
| GRAVEL P | ACK INTERVALS: From From | | | ft., From | | |
| 6 GROUT MATERIA | | 2 Cement grout | 3 Bento | | | 11. 10 |
| | | | | | | ft. toft. |
| | source of possible contami | | | 10 Livesto | | 14 Abandoned water well |
| 1 Septic tank | 4 Lateral lines | 7 Pit privy | | 11 Fuel s | | 15 Oil well/Gas well |
| 2 Sewer lines | 5 Cess pool | 8 Sewage lago | ion | | er storage | 16 Other (specify below) |
| | wer lines 6 Seepage pit | 9 Feedyard | | | cide storage | To other (speemy below) |
| Direction from well? | wei lines o Seepage pit | 3 Teedyard | | How man | ŭ | |
| FROM TO | LITH | OLOGIC LOG | FROM | TO | | GING INTERVALS |
| 0 12 | Clay | | | | | |
| 12 130 | Blue shale | | | | | |
| 130 152 | Limestone | | | | | |
| 152 177 | Blue Shale | | | | | |
| 177 260 | Limestone | | | | | |
| | 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 | | | | | |
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| | 4.35.550 | | | | | |
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| | | | as (1) constru | cted, (2) recor | nstructed, or (3) plugo | ged under my jurisdiction and was |
| completed on (mo/da | y/year) 512619 | | | | | f my knowledge and belief. Kansas |
| | or's License No | | ell Record wa | s completed 8 | n (mo/day/yr) 📈 | [[.] |
| under the business n | ame of LOOD Ter | th Intl | | by (signatu | ure) Sun 4 X | · JESWALLASTY |
| | | SE PRESS FIRMLY and PRINT clearly. Plea | | | | |
| of Health and Environ | ment. Bureau of Water, Topeka, F | Kansas 66620-0001. Telephone: 913-296-55 | 345. Send one to | WATER WELL OW | NEH and retain one for you | ur records. |