## CORRECTION(S) TO WATER WELL RECORD (WWC-5) (to rectify lacking or incorrect information)

Location listed as:	Location changed to:
Section-Township-Range: 6-13 5-9 E	6-135-9E
Fraction ( 1/4 1/4 1/4): 5W 5W 5E	SW NE SW SE
Other changes: Initial statements: No county give	n
Changed to: Wabaun see County.	
Comments:	
verification method: Latitude # longitude,	KGS' "LEO" Conversion tool,
position on plat map, legal descri aerial photo on KGS website.	ption, and mapping tool # initials: DRL date: 6/9/2009
submitted by: Kansas Geological Survey, Data Resources Library, 1930 Coto: Kansas Dept of Health & Environment, Bureau of Water, 1000 SW Jack	onstant Ave., Lawrence, KS 66047-3726

WATE	R WELL	RECORD	Form WWC-	5	Division	of Wate	r Resources; App. No.	
1 LOC Coun		F WATER WELL:	Fraction 5W 1/4S	<b>S</b> 1/4	Section N	umber	Township Number T /3 S	Range Number R <b>5 6</b> /W
		rection from nearest town or c	ity street address of we	ell if (	Global Pos	itioning	Systems (decimal deg	rees, min. of 4 digits)
located within city?					Latitude: 38.94397			
2 WATER WELLOWNER MALL AND					Longitude: <u>96, 4577 0</u> Elevation: 1277			
2 WA'	. St. Addre	SS, Box # : 36301 W. Sp	rin Creal Rd		Datum:			
City	State, ZIP	Code : Alma, KS.	1060101				Method: Hand	Ual 0
3 LOC	ATE WEI		PLETED WELL	188				Heix
1	ATION			•				
1	H AN "X"		r Encountered (1)					ft.
SEC	FION BOX	WELL'S STATIC WA	ATER LEVEL	ft.	below land	l surface	measured on mo/day	/yr
		Fst Vield on	a: Well water was n: Well water was	<del></del>	II. aller ft after	ســـــــــــــــــــــــــــــــــــــ	hours numping	gpm
	,	WELL WATER TO E	BE USED AS: 5 Publ					
w   NV	V   NE -	E   1 Domestic 3 Fee					vatering 12-01	For (Specify below)
		2 Irrigation 4 Inc	dustrial 7 Domesti	c (lawn &	& garden)	10 Mor	nitoring well	Geo Thermal
SV	/ SE -	- Was a chemical/bacte	riological sample subn	nitted to I	Denartment	2 Vec	No ×·	If yes mo/day/yrs
	<b></b>		1					
	S	Sumpre was successful.						
5 TYPI	E OF CAS	ING USED: 5 Wrought	Iron 8 Conc	rete tile		CASING	G JOINTS: Glued	Clamped
1	Steel	3 RMP (SR) 6 Asbestos	-Cement Others	(specify	below)		Welded,	2
	PVC	4 ABS 7 Fiberglas	s		P.J.=		Threaded	1
Blank ca	ising diame	eter	ft., Diameter	1	n. to	It.,	Diameter	In. tott.
		N OR PERFORATION MAT			108./11.	wan unc	ckness of guage No.	
1	Steel	3 Stainless Steel 5 Fibe	rglass 7 PVC	9 A	ABS	_	11 Other (Specify)	
1	Brass	4 Galvanized Steal 6 Con	crete tile 8 RM (SR	) 10 A	Asbestos-C	ement	12 None used (oper	hole)
1		FORATION OPENINGS AR			0 D 31		11.37	- 1-)
1 2	Continuous	s slot 3 Mill slot 5 C hutter 4 Key punched 6 V	Gauzed wrapped 7 T	orch eut	9 Drille	ed noies (specify	11 None (open i	iole)
SCREE	N-PERFOR	RATED INTERVALS: From.	viic wrapped ft. to	aw cui	ft	From	ft. to	ft.
		From	ft. to		ft.,	From	ft. to	ft.
	GRAVEL	PACK INTERVALS: From						
		From	ft. to		ft.,	From	ft. to	ft.
6 GRO	UT MATE	RIAL: 1 Neat cement 2	Cement grout 3 Ber	ftonite	4 Other			
Grout In		From ft. to		<del></del>	ft. to	<del></del> f	t., From	ft. toft.
1		source of possible contamina		0.7.1	1	12.7		1. (
	Septic tank Sewer line:		1 2	1 Fuel st	ock pens		secticide storage bandoned water well	1 (specify below)
		sewer lines 6 Seepage pit			zer storage			House
		1? West	H	How man	y feet?		<b>/</b> .8	
FROM	TO	LITHOLOGIC	CLOG	FROM	OT		PLUGGING INT	ERVALS
9 62	3	Linestone						
13	62	Gray Shalz				71-	HOLES TO 16	00
75	75	Limistone Alt-Shale			-	7	710423 ()0 /8	<i>D</i>
125	138	Limestone						
138	166	AltShalz						
166	169	Limestonz						
169	188	Alt-Shalz						
					ALL ET MA	Λ		
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (Constructed, (2) reconstructed, or (3) plugged								
under my jurisdiction and was completed on (mo/day/year)								
Kansas Water Well Contractor's License No								
under the business name of ASSOCIATED VILLAGE TWO by (signature)  INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks, underline or circle the correct answers. Send top								
three coni	CTIONS: Us	e typewriter or ball point pen. <u>PLE</u>	ASE PRESS FIRMLY and F ent. Bureau of Water, Geolo	PRINT clear	rly. Please fil	II in blank: ckson St.	s, underline or circle the c Suite 420. Toneka. Kansa	orrect answers. Send top s 66612-1367. Telephone
three copies to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. 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/index.html.								