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

(to rectify lacking or incorrect information)

Location listed as:	County: Dougla s Location changed to:
Section-Township-Range:	11-155-19E
Fraction (1/4 1/4 1/4):	SE SW SW
Other changes: Initial statements: Franklin County	<u> </u>
Baldwin City go west 3 mile to 59 South -	3 mi to N 100 2 mi west.
Changed to: Douglas County.	
From Baldwin City: 3.5 mi. W. to Hwy	59, 2 mi. 5. to N. 100 Rd., 3/8 mi, W
Comments:	
verification method: Phone call to well contr	actor, county road map, and
mapping tool & acrial photos or	n KGS website.
	initials:
1 . in the Kenner Could in Common Data Bassana Library 1020 Cd	

submitted by: Kansas Geological Survey, Data Resources Library, 1930 Constant Ave., Lawrence, KS 66047-3726 to: Kansas Dept of Health & Environment, Bureau of Water, 1000 SW Jackson, Suite 420, Topeka, KS 66612-1367.

WATER WELL RI	ECORD	Form WWC	2-5	Division of V	Water :	Resources; App. No.				
1 LOCATION OF WATER WELL: Fraction			Section Numb	er	Township Number	Range Number				
Distance and direction	County: FAVELIN SE 1/4 SW/4 SW/4 T SS R 9 (E/W) Distance and direction from nearest town or city street address of well if Global Positioning Systems (decimal degrees, min. of 4 digits)									
Located within city?										
Billium City 90 WEST 3 Mel To 55 South 3 Meto N/100 ZM WEST ingitude:										
2 WATER WELL OWNER: PUD#5 FRANKING CO. RR#, St. Address, Box # : 35270 H10 Kk City, State 7IP Code Datum:										
City, State, ZIP Coo	de : Ottou	n. 15 6601	17	Data Collecti	ion M	lethod:				
3 LOCATE WELL'S 4 DEPTH OF COMPLETED WELLf./										
WITH AN "X" IN Depth(s) Groundwater Encountered (1) ft. (2) ft. (3) ft.										
SECTION BOX:	ION BOX: WELL'S STATIC WATER LEVEL									
N	Pump test data: Well water wastt. afterhours pumpinggpm									
	Est. Yieldgpm: Well water wasft. after									
W 1 E 1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)										
	2 Irrigation 4	Industrial 7 Domes	tic (lawn &	garden) (19)	Monit	toring well				
SW SE	Was a chemical/ba	cteriological sample sub	mitted to D	epartment?	Yes	No	If yes, mo/day/yrs			
Was a chemical/bacteriological sample submitted to Department? Yes No; If yes, mo/day/yrs Sample was submitted										
S										
		ght Iron 8 Con stos-Cement 9 Other	crete tile er (specify l		SING		Clamped			
Blank casing diameter										
TYPE OF SCR	PERFORATION MA	ATERIAL:		US./II. Wai	II UIICI	kness of guage No.	- SA 40			
1 Steel 3 S	tainless Steel 5 F	iberglass 7 PVC	9 A	BS		11 Other (Specify)				
2 Brass 4 G SCREEN OR PERFOR	raivanized Steal 6 C	oncrete tile 8 KM (Si	R) 10 A	sbestos-Ceme	ent	12 None used (open	hole)			
1 Continuous slo	t 3 Mill slot	5 Guazed wrapped 7 T	orch cut	9 Drilled ho	oles	11 None (open ho	ole) ////A			
2 Louvered shutter 4 Key punched 6 Wire wrapped 8 Saw Cut 10 Other (specify)										
SCREEN-PERFORAT		om ft. to								
GRAVEL PACK INTERVALS: From										
	Fro	omft. to		ft., Fron	m	ft. to	ft.			
6 GROUT MATERIA	AL: 1 Neat cement	2 Cement grout 3 Be	entonite							
		ft., From	1	t. to	ft.,	From	ft. toft.			
What is the nearest source of possible contamination: 1 Septic tank 4 Lateral lines 7 Pit privy 10 Livestock pens 13 Insecticide Storage 16 Other (specify)										
2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 14 Abandoned water well below)										
3 Watertight sew Direction from well?				feet?		well/gas well				
FROM TO	LITHOLO		FROM	TO		PLUGGING INT	ERVALS			
			1//-	2 /	SCI	double He	le aluer			
			110	2 1	1210	ABM-C NO	a gener			
			h	7	17	Cel				
			3	0 1	Op					
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)										
Kansas Water Well Contractor License 10 5.50 This Water Well Record was completed on (molday/year) 5.50 under the business name of the following the first than the business name of the first than the following the second secon										
INSTRUCTIONS: Use typewater or ball point ben. ALEASE PRESS ARMLY and PRINT clearly. Please fill in blanks, under or circle the correct answers. Send ton										
three copies to Kansas Department of Health and Environment, Bureau of Water, Goology 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.kdhe.state.ks.us/geo/waterwells.										