

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

County: Franklin

Location listed as:

Location changed to:

Section-Township-Range: 13-65-17E

13-165-17E

Fraction (  $\frac{1}{4}$   $\frac{1}{4}$   $\frac{1}{4}$ ): NE SW SE

NE NE SW SE

Other changes: Initial statements: No written description given

Changed to: From Pomona: 2.5 mi N, 1.25 mi W.

Comments: \_\_\_\_\_

verification method: Latitude & longitude, legal description, position on plat map, and mapping tool & aerial photos on KGS website.

initials: ORL date: 6/10/2009

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 RECORD

## Form WWC-5

Division of Water Resources; App. No.

<b>1 LOCATION OF WATER WELL:</b> County: <u>FRANKLIN</u>		Fraction <u>N 1/4 SW 1/4 SE 1/4</u>	Section Number <u>13</u>	Township Number T <u>6</u> S	Range Number R <u>17</u> <u>E/W</u>
Distance and direction from nearest town or city street address of well if located within city?			<b>Global Positioning Systems</b> (decimal degrees, min. of 4 digits) Latitude: <u>38.65534</u> Longitude: <u>95.47721</u> Elevation: <u>1116</u> Datum: _____ Data Collection Method: _____		
<b>2 WATER WELL OWNER:</b> <u>ALFREDO GONZALES</u> RR#, St. Address, Box # : <u>11730 W. HARMONY LN.</u> City, State, ZIP Code : <u>OLATHE, KS 66062</u>					
<b>3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:</b> N W   NW   NE   E SW   SE   S		<b>4 DEPTH OF COMPLETED WELL</b> ..... <u>300</u> ..... ft. Depth(s) Groundwater Encountered (1) <u>247</u> ..... ft. (2) ..... ft. (3) ..... ft. WELL'S STATIC WATER LEVEL <u>191</u> ..... ft. below land surface measured on mo/day/yr. <u>3/2/09</u> Pump test data: Well water was ..... ft. after ..... hours pumping ..... gpm Est. Yield <u>20</u> gpm: Well water was ..... ft. after ..... hours pumping ..... gpm WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well 1 <u>Domestic</u> 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below) 2 Irrigation 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well Was a chemical/bacteriological sample submitted to Department? Yes ..... No <u>X</u> .....; If yes, mo/day/yr Sample was submitted ..... Water well disinfected? Yes <u>X</u> ..... No .....			
<b>5 TYPE OF CASING USED:</b> 1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) <u>2 PVC</u> 4 ABS 7 Fiberglass Blank casing diameter ..... <u>6</u> ..... in. to <u>260</u> ..... ft., Diameter ..... in. to ..... ft., Diameter ..... in. to ..... ft. Casing height above land surface <u>24</u> ..... in., Weight ..... lbs./ft. Wall thickness or guage No. <u>SDR26</u> TYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel 3 Stainless Steel 5 Fiberglass <u>PVC</u> 9 ABS 11 Other (Specify) ..... 2 Brass 4 Galvanized Steel 6 Concrete tile 8 RM (SR) 10 Asbestos-Cement 12 None used (open hole) SCREEN OR PERFORATION OPENINGS ARE: 1 Continuous slot <u>Mill slot</u> 5 Gauzed wrapped 7 Torch cut 9 Drilled holes 11 None (open hole) 2 Louvered shutter 4 Key punched 6 Wire wrapped 8 Saw cut 10 Other (specify) ..... SCREEN-PERFORATED INTERVALS: From <u>260</u> ..... ft. to <u>280</u> ..... ft., From ..... ft. to ..... ft. From ..... ft. to ..... ft., From ..... ft. to ..... ft. GRAVEL PACK INTERVALS: From <u>200</u> ..... ft. to <u>300</u> ..... ft., From ..... ft. to ..... ft. From ..... ft. to ..... ft., From ..... ft. to ..... ft.					
<b>6 GROUT MATERIAL:</b> 1 Neat cement 2 Cement grout <u>Bentonite</u> 4 Other ..... Grout Intervals: From <u>0</u> ..... ft. to <u>25</u> ..... ft., From <u>780</u> ..... ft. to <u>200</u> ..... ft., From ..... ft. to ..... ft. What is the nearest source of possible contamination: 1 Septic tank 4 Lateral lines 7 Pit privy 10 Livestock pens 13 Insecticide storage <u>6 Other (specify below)</u> 2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 14 Abandoned water well 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer storage 15 Oil well/gas well <u>HOUSE</u> Direction from well? <u>W 1/4 S 1/4</u> How many feet? <u>65</u>					
<b>FROM TO LITHOLOGIC LOG</b>			<b>FROM TO PLUGGING INTERVALS</b>		
0	6	CLAY, GRAY	150	153	LEIMSTONE
6	8	LEIMSTONE	153	237	SHALE, GRAY
8	31	SHALE, GRAY	237	281	SANDSTONE w/ THIN BEAS SURF.
31	34	LEIMSTONE, GRAY	281	295	LEIMSTONE
34	41	SHALE, GRAY	295	300	SHALE, GRAY
41	58	SANDSTONE, GRAY			
58	78	LEIMSTONE			
78	118	SHALE, GRAY			
118	135	LEIMSTONE			
135	150	SHALE, GRAY			
<b>7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:</b> This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) <u>3/2/09</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>766</u> This Water Well Record was completed on (mo/day/year) <u>3/2/09</u> under the business name of <u>ASSOCIATED INDUSTRIAL</u> by (signature) <u>[Signature]</u>					
<b>INSTRUCTIONS:</b> Use typewriter or ball point pen. <u>PLEASE PRESS FIRMLY</u> and <u>PRINT</u> clearly. Please fill in blanks, underline or circle the correct answers. Send top 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 <u>constructed</u> well. Visit us at <a href="http://www.kdheks.gov/waterwell/index.html">http://www.kdheks.gov/waterwell/index.html</a> .					