

County: Franklin Fraction: SW SW SW Sec. 18 T. 16 S R. 19 E

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

Owner: Robert Summer

If location corrected, was listed as:

Section-Township-Range: 18-16-18E

Location changed to:

18-16-19E

Fraction (1/4 calls): _____

Other changes: Initial statements: _____

Changed to: _____

Comments: _____

Verification method: Description of well location on Water Well Completion Record, Conversation with
landowner adjacent to reported incorrect location.

Initials: DLS Date: 11/14/2023

Submitted by: ☒ Kansas Geological Survey, Data Resources Library, 1930 Constant Ave., Lawrence, KS 66047-3724
☐ Kansas Dept. of Health & Environment, Bureau of Water, 1000 SW Jackson, Suite 420, Topeka, KS 66612-1367

USE TYPEWRITER OR BALL
POINT PEN-PRESS FIRMLY,
PRINT CLEARLY.

WATER WELL RECORD
KSA 82a-1201-1215

Kansas Department of Health and
Environment-Division of Environment
(Water well Contractors)
Topeka, Kansas 66620

1. Location of well:	County Franklin	Fraction SW 1/4 SW 1/4 SW 1/4	Section number 18	Township number T 16 S	Range number R 18 E 4
2. Distance and direction from nearest town or city: 1/4 SW 1/2 N			3. Owner of well: Robert Summer		
Street address of well location if in city: Ottawa			R.R. or street: RR4		
			City, state, zip code: Ottawa, Kan. 66067		
4. Locate with "X" in section below:			Sketch map:		
<div style="text-align: center;"> </div>					
5. Type and color of material			6. Bore hole dia. 8 1/2 in. Completion date 11-22-78		
			Well depth 115 ft. 9" to 20		
			7. <input checked="" type="checkbox"/> Cable tool <input type="checkbox"/> Rotary <input type="checkbox"/> Driven <input type="checkbox"/> Dug		
			<input type="checkbox"/> Hollow rod <input type="checkbox"/> Jetted <input type="checkbox"/> Bored <input type="checkbox"/> Reverse rotary		
			8. Use: <input checked="" type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry		
			<input type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input type="checkbox"/> Stock		
			<input type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other		
			9. Casing: Material <input type="checkbox"/> Height: Above or below		
			Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface 18 in.		
			RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight sch 40 lbs./ft.		
			Dia. 8 1/2 in. to 20 ft. depth		
			Wall thickness: inches or		
			Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth		
			Gage No. sch 40		
			10. Screen: Manufacturer's name none		
			Type <input type="checkbox"/> Dia. <input type="checkbox"/>		
			Slot/gauze <input type="checkbox"/> Length <input type="checkbox"/>		
			Set between <input type="checkbox"/> ft. and <input type="checkbox"/> ft.		
			<input type="checkbox"/> ft. and <input type="checkbox"/> ft.		
			Gravel pack? no Size range of material <input type="checkbox"/>		
			11. Static water level: 26 ft. below land surface Date 11-22-78		
			12. Pumping level below land surfaces:		
			<input type="checkbox"/> ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m.		
			<input type="checkbox"/> ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m.		
			Estimated maximum yield 1 1/2 g.p.m.		
			13. Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date <input type="checkbox"/>		
			14. Well head completion: pump house		
			<input type="checkbox"/> Pitless adapter <input type="checkbox"/> inches above grade		
			15. Well grouted? <input type="checkbox"/>		
			With <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete		
			Depth: From 0 ft. to 20 ft.		
			16. Nearest source of possible contamination:		
			ft. 75 Direction north Type septic		
			Well disinfected upon completion? <input type="checkbox"/> Yes <input type="checkbox"/> No		
			17. Pump: <input type="checkbox"/> Not installed		
			Manufacturer's name Rad Jacket		
			Model number <input type="checkbox"/> HP 2 Volts 220		
			Length of drop pipe <input type="checkbox"/> ft. capacity <input type="checkbox"/> g.p.m.		
			Type:		
			<input checked="" type="checkbox"/> Submersible <input type="checkbox"/> Turbine		
			<input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating		
			<input type="checkbox"/> Centrifugal <input type="checkbox"/> Other		
			(Use a second sheet if needed)		
18. Elevation:		19. Remarks:			
Topography:					
<input type="checkbox"/> Hill					
<input type="checkbox"/> Slope					
<input checked="" type="checkbox"/> Upland					
<input type="checkbox"/> Valley					
		20. Water well contractor's certification:			
		This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.			
		Royce Swank Drilling 371			
		Business name RR4 Ottawa, Kan. 66067 License No. 11-22-78			
		Address Royce Swank Date 11-22-78			
		Signed: Royce Swank Authorized representative			

Forward the white, blue and pink copies to the Department of Health and Environment

Form WWC-5