

County: Dickinson Fraction NW NE NW SE Sec. 12 T 16 S R 4 EW

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

(to rectify lacking or incorrect information)

Owner: John Day

Location was listed as:

Location changed to:

Section-Township-Range: 12-16S-4E

12-16S-4E

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

NW NE NW SE

Other changes: Initial statements: _____

Changed to: _____

Comments: _____

Verification method: wellsite address, city street map, and
mapping tool & aerial photo on KGS website.

initials: DRJ date: 6/2/2015

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.

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

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|-----------------------------------------------------------------------------------------------------------------------------------------------------------------|--|------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------|-----------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1. Location of well: | | County Dickinson | Fraction NE 1/4 SW 1/4 NE 1/4 | Section number 12 | Township number T 16 S R 4 E | Range number 4 E |
| 2. Distance and direction from nearest town or city: Street address of well location if in city: Henington 622 E Arnold | | | 3. Owner of well: John Day R.R. or street: 622 E Arnold City, state, zip code: Henington, Kan | | | |
| 4. Locate with "X" in section below: | | Sketch map: | | | 6. Bore hole dia. 6 1/4 in. Completion date 6-15-77 Well depth 80 ft. | |
| | | | | | 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 | |
| 5. Type and color of material | | From | | To | | 8. Use: <input 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 checked="" type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other |
| Topsoil - Blk | | 0 | | 5 | | 9. Casing: Material PIES Height: Above or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface 14 in. RMP <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Weight <input type="checkbox"/> lbs./ft. Dia. 5 in. to 60 ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. 1200 |
| Broken Lime - Yel | | 5 | | 10 | | 10. Screen: Manufacturer's name Sunflower Type RMP Dia. 5" Slot/gauze 1/16 Length 20' Set between 60 ft. and 80 ft. ft. and <input type="checkbox"/> ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material 1/8-3/8 |
| LIME - Yel | | 10 | | 17 | | 11. Static water level: <input type="checkbox"/> mo./day/yr. 28 ft. below land surface Date 6-15-77 |
| Shale - Lite | | 17 | | 23 | | 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 20 g.p.m. |
| LIME - Yel | | 23 | | 27 | | 13. Water sample submitted: <input type="checkbox"/> mo./day/yr. Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Date <input type="checkbox"/> |
| Shale - Yel | | 27 | | 36 | | 14. Well head completion: <input type="checkbox"/> Pitless adapter 14 inches above grade |
| Red Rock - Red | | 36 | | 43 | | 15. Well grouted? Yes With: <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Concrete Depth: From 0 ft. to 13 ft. |
| LIME - Yellow | | 43 | | 45 | | 16. Nearest source of possible contamination: Sewer ft. 50 Direction NW Type LIME Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
| Shale - Yel | | 45 | | 52 | | 17. Pump: <input type="checkbox"/> Not installed Manufacturer's name Goulds Model number 10E5 HP 5 Volts 230 Length of drop pipe 22 ft. capacity 10 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 |
| Red Rock Red | | 52 | | 69 | | 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. ZINN Water Well Drilling 218 Business name Lost Springs Kan License No. <input type="checkbox"/> Address Joseph A. Zinn Date 7-22-77 Signed Joseph A. Zinn Authorized representative |
| Shale - Yel | | 69 | | 76 | | |
| LIME - Yel | | 76 | | 80 | | |
| | | | | | | |
| 18. Elevation: | | 19. Remarks: Concrete slab to be incorporated with Add on to house | | | | |
| Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley | | | | | | |

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

Form WWC-5