

CORRECTION TO WATER WELL RECORD (WWC-5)

The following correction(s) was made to the attached WWC-5 log, in order to file the item or to rectify lacking or incorrect information.

Fraction (1/4 1/4 1/4) Section-Township-Range changed:

listed as 12-16S-4E

changed to SE, SE, SW, 12-16S-4E

Other changes: Initial statements: _____

Changed to: _____

Comments: _____

verification method: Address on form, Herington city map on internet,
& Herington 1:24,000 topo. map. initials: ARL date: 2/5/99

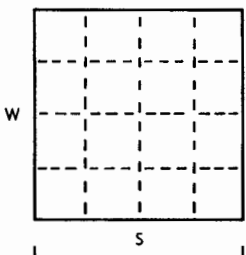
submitted by: Kansas Geological Survey, Data Resources Library, 1930 Constant Ave., Lawrence, KS 66047-3726
to: Kansas Dept of Health & Environment Bureau of Water Industrial Programs, Bldg 283, Forbes Field, KS 66620

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

T R EW sec 1/4 1/4 1/4 No.

WATER WELL RECORD
KSA 82a-1201-1215

Kansas State Dept. Of Health
(Water Well Contractors)
Forbes-Bldg. 740
Topeka, Kansas 66620

1 Location of well:	County <u>Dickinson</u>	Township name <u>Lyon</u>	Fraction	Section number <u>12</u>	Town number <u>16-S</u>	Range number <u>4-E</u>		
Distance and direction from nearest town or city: <u>City of Herington</u> Street address of well location if in city:				3 Owner of well: <u>Andrew Beisel</u> Address: <u>201 South C. Herington Ks</u>				
Locate with "X" in section below: N  W E S 1 Mile				Sketch map:				
2 Type and color of material				From	To			
				<u>Top Soil</u>		<u>0</u>	<u>2</u>	
				<u>Yellow Clay</u>		<u>2</u>	<u>25</u>	
				<u>Red Shale</u>		<u>25</u>	<u>45</u>	
				<u>Lime Stone</u>		<u>45</u>	<u>60</u>	
				<u>Some water</u>		<u>60</u>		
				<u>Lime Stone</u>		<u>60</u>	<u>75</u>	
				<u>Water</u>		<u>75</u>	<u>80</u>	
				<u>Lime Stone</u>		<u>80</u>	<u>83</u>	
				(use a second sheet if needed)				
4 Well depth: <u>83</u> ft. Date of completion <u>7-17-75</u> Well diameter <u>9</u> in.				5 <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				
6 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"/> Commercial <input type="checkbox"/> Test well				7 Casing: Material <u>PRC</u> Height: above/below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <u>12</u> m. Digm. <u>Clas</u> Weight <u>160</u> lbs./ft. <u>5</u> in. to <u>83</u> ft. depth Drive shoe? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No — in. to — ft. depth				
8 Screen: Manufacturer <u>Pumpco</u> Type <u>Phasie</u> Dia. <u>5"</u> Slot/gauze <u>3/8</u> Length <u>10</u> Set between <u>70</u> ft. and <u>80</u> ft. Fittings: Gravel pack <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Size range of material <u>3/8</u>				9 Static water level: <u>30</u> ft. below land surface Date <u>7-17-75</u>				
10 Pumping level below land surfaces: — ft. after — hrs. pumping — g.p.m. — ft. after — hrs. pumping — g.p.m. Estimated maximum yield — g.p.m.				11 Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date —				
12 Well head completion: <input type="checkbox"/> Pitless adapter <input type="checkbox"/> Inches above grade				13 Well grouted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Depth: From <u>3</u> ft. to <u>13</u> ft.				
14 Nearest source of possible contamination: ft. <u>50</u> Direction <u>East</u> Type <u>Pasture</u> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				15 Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name _____ Model number _____ HP _____ Volts _____ Length of drop pipe _____ ft. capacity _____ g.m.p. Type: <input type="checkbox"/> Submersible <input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating <input type="checkbox"/> Centrifugal <input type="checkbox"/> Other				
16 Remarks: elevation Topography: <input checked="" type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley				17 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. <u>Backhus Drilling 180</u> Business name _____ License No. _____ Address <u>Tampa, Ks</u> Signed <u>Paul Backhus</u> Date <u>7-20-75</u> Authorized representative				