

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

(to rectify lacking or incorrect information)

County: MARION

Location listed as:

Section-Township-Range: 2-17-11E

Fraction ($\frac{1}{4}$ $\frac{1}{4}$ $\frac{1}{4}$): _____

Location changed to:

2-17-3E

SE SE SE

Other changes: Initial statements: _____

Changed to: _____

Comments: _____

verification method: location of other monitoring wells in series.

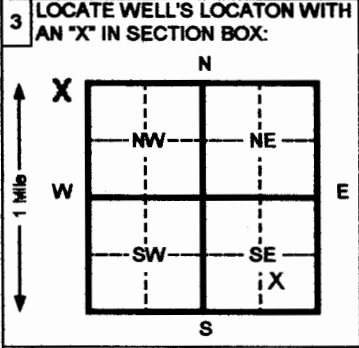
initials: DA date: 11/6/06

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.

1 LOCATION OF WATER WELL: Fraction **SE 1/4 SE 1/4 SE 1/4** Section Number **2** Township Number **T 17 N S** Range Number **R 11 E W**
 County: **Marion**

Distance and direction from nearest town or city street address of well if located within city?

2 WATER WELL OWNER: **USDA/CCC**
 RR#, St. Address, Box #: **Stop 0513, Room 4717-S/ 1400 Independence Ave SW** Board of Agriculture, Division of Water Resources
 City, State, ZIP Code: **Washington, DC 20250-0513** Application Number:



4 DEPTH OF COMPLETED WELL **55.5** ft. ELEVATION: **1,436.204'**
 Depth(s) Groundwater Encountered 1 **48** ft. 2 _____ ft. 3 _____ ft.
 WELL'S STATIC WATER LEVEL **47.00** ft. below land surface measured on **09/28/06**
 Pump test data: Well water was **N/A** ft. after **N/A** hours pumping **N/A** gpm
 Est. Yield **N/A** gpm: Well water was **N/A** ft. after **N/A** hours pumping **N/A** gpm
 Bore Hole Diameter **4.25** in. to **21** ft. and **3.5** in. to **55.5** ft.
 WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well
 1 Domestic 3 Feed lot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)
 2 Irrigation 4 Industrial 7 Lawn and garden (domestic) 10 Monitoring well **Sand Point MW**
 Was a chemical/bacteriological sample submitted to Department? Yes _____ No **X** If yes, mo/day/yr sample was submitted **N/A** Water Well Disinfected? Yes _____ No **X**

5 TYPE OF BLANK CASING USED: 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued _____ Clamped _____
 1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded _____
 2 PVC 4 ABS 7 Fiberglass Threaded **X**
 Blank casing diameter **1"** in. to **45** ft., Dia **N/A** in. to **N/A** ft., Dia **N/A** in. to **N/A** ft.
 Casing height above land surface **Flush Mount** in., weight **Schedule 40** lbs./ft. Wall thickness or gauge No. **.133"**
 TYPE OF SCREEN OR PERFORATION MATERIAL: 7 PVC 10 Asbestos-cement
 1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 11 Other (specify)
 2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 12 None used (open hole)
 SCREEN OR PERFORATION OPENINGS ARE: 5 Gauzed wrapped 8 Saw cut 11 None (open hole)
 1 Continuous slot 3 Mill slot 6 Wire wrapped 9 Drilled holes
 2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify)
 SCREEN-PERFORATED INTERVALS: From **45** ft. to **55** ft. From _____ ft. to _____ ft.
 From _____ ft. to _____ ft. From _____ ft. to _____ ft.
 GRAVEL PACK INTERVALS: From **44** ft. to **55** ft. From _____ ft. to _____ ft.
 From _____ ft. to _____ ft. From _____ ft. to _____ ft.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other **BenSeal Chips**
 Grout intervals From **40 (#3)** ft. to **0.5** ft. From **44 (#4)** ft. to **40** ft. From **N/A** ft. to **N/A** ft.
 What is the nearest source of possible contamination: 10 Livestock pens 14 Abandoned water well
 1 **Septic tank** 4 Lateral lines 7 Pit privy 11 Fuel storage 15 Oil well/ Gas well
 2 Sewer lines 5 Cess pool 8 Sewage lagoon 12 Fertilizer storage 16 Other (specify below)
 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 13 Insecticide storage
 Direction from well? **850' East**
 How many feet?

FROM	TO	CODE	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	2'		Top Soil			
2'	46'		Silt and Clay			
46'	49'		Silty Clay			
49'	50'		Silty Clay with some Sand			
50'	54'		Silty Clay and Sand			
54'	55.5'		Clay and Silt			

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/yr) **09/27/06** and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **680** This Water Well Record was completed on (mo/day/yr) **10-12-06** under the business name of **Delta Environmental** by (signature)