

County: Coffey Fraction NE NE NE NW Sec. 17 T 19 S R 16 EW

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

Owner: Tim Totty

Location was listed as:

Section-Township-Range: 17-18S-15E

Fraction (1/4 1/4 1/4): NE NE NE NW

Location changed to:

17-19S-16E

NE NE NE NW

Other changes: Initial statements: \_\_\_\_\_

Changed to: \_\_\_\_\_

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

Verification method: Written description, position on plat map,  
Coffey County online parcel search, and mapping tool and  
aerial photos on KGS website. initials: DR date: 7/9/2013

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>Cottley</u> Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here <input type="checkbox"/>	Fraction <u>NE NE NW</u> <u>NE 1/4 NE 1/4 NW 1/4</u>	Section Number <u>17</u>	Township No. T <u>18</u> S	Range Number R <u>15</u> <input checked="" type="checkbox"/> E <input type="checkbox"/> W
Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here <input type="checkbox"/>		<b>Global Positioning System (GPS) information:</b> Latitude: ..... (in decimal degrees) Longitude: ..... (in decimal degrees) Elevation: ..... Datum: <input type="checkbox"/> WGS 84, <input type="checkbox"/> NAD 83, <input type="checkbox"/> NAD 27 Collection Method: <input type="checkbox"/> GPS unit (Make/Model: .....) <input type="checkbox"/> Digital Map/Photo, <input type="checkbox"/> Topographic Map, <input type="checkbox"/> Land Survey Est. Accuracy: <input type="checkbox"/> <3 m, <input type="checkbox"/> 3-5 m, <input type="checkbox"/> 5-15 m, <input type="checkbox"/> >15 m		
<b>2 WATER WELL OWNER:</b> RR#, Street Address, Box #: <u>32015 S. Wanamaker Rd</u> City, State, ZIP Code : <u>Lebo, KS 66851</u>		Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here <input type="checkbox"/>		

**3 LOCATE WELL WITH AN "X" IN SECTION BOX:**

N

	<input checked="" type="checkbox"/>		
W	-- NW --	-- NE --	E
	-- SW --	-- SE --	
	S		

|-----1 mile-----|

**4 DEPTH OF COMPLETED WELL** ..... 100 ft.

Depth(s) Groundwater Encountered (1) 41.86 ft. (2) ..... ft. (3) ..... ft.

WELL'S STATIC WATER LEVEL ..... 13 ft. below land surface measured on mo/day/yr. 12.6.12

Pump test data: Well water was ..... ft. after ..... hours pumping ..... gpm

EST. YIELD 4.5 gpm. Well water was ..... ft. after ..... hours pumping ..... gpm

Bore Hole Diameter 8.74 in. to 100 ft., and ..... in. to ..... ft.

WELL WATER TO BE USED AS:  Public water supply  Geothermal  Injection well

Domestic  Feedlot  Oil field water supply  Dewatering  Other (Specify below)

Irrigation  Industrial  Domestic-lawn & garden  Monitoring well

Was a chemical/bacteriological sample submitted to Department?  Yes  No

If yes, mo/day/yr sample was submitted.....

Water well disinfected?  Yes  No

**5 TYPE OF CASING USED:**  Steel  PVC  Other .....

CASING JOINTS:  Glued  Clamped  Welded  Threaded

Casing diameter ..... 5 in. to 60 ft., Diameter ..... 5 in. to 80-100 ft., Diameter ..... in. to ..... ft.

Casing height above land surface ..... in., Weight ..... lbs./ft., Wall thickness or gauge No. ....

TYPE OF SCREEN OR PERFORATION MATERIAL:

Steel  Stainless Steel  PVC  Other (Specify) .....

Brass  Galvanized Steel  None used (open hole)

SCREEN OR PERFORATION OPENINGS ARE:

Continuous slot  Mill slot  Gauze wrapped  Torch cut  Drilled holes  None (open hole)

Louvered shutter  Key punched  Wire wrapped  Saw cut  Other (specify) .....

SCREEN-PERFORATED INTERVALS: From 60 ft. to 80 ft., From ..... ft. to ..... ft.

GRAVEL PACK INTERVALS: From ..... ft. to ..... ft., From ..... ft. to ..... ft.

**6 GROUT MATERIAL:**  Neat cement  Cement grout  Bentonite  Other .....

Grout Intervals: From 25 ft. to 20 ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.

What is the nearest source of possible contamination:

Septic tank  Lateral lines  Pit privy  Livestock pens  Insecticide storage  Other (specify below)

Sewer lines  Cesspool  Sewage lagoon  Fuel storage  Abandoned water well

Watertight sewer lines  Seepage pit  Feedyard  Fertilizer storage  Oil well/gas well

Direction from well ..... Distance from well .....

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
0	16	Soil/clay			
16	36	Shale			
36	40	lime			
40	41	Shale			
41	56	Sand			
56	86	lime			
86	94	Shale			
94	100	lime			

**7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:** This water well was  constructed,  reconstructed, or  plugged under my jurisdiction and was completed on (mo/day/year) 12.6.12 and this record is true to the best of my knowledge and belief.

Kansas Water Well Contractor's License No. 561 This Water Well Record was completed on (mo/day/year) 12.10.12 under the business name of Evans Energy Dev. Inc. by (signature) [Signature]

**INSTRUCTIONS:** Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks and check the correct answers. Send three copies (white, blue, pink) to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5524. Send one copy to WATER WELL OWNER and retain one for your records. Include fee of \$5.00 for each constructed well. Visit us at <http://www.kdheks.gov/waterwell/index.html>.