

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 NE NE NE, 20-18-19S-5

changed to NE NE NE, 19-19S-5E

Other changes: Initial statements: _____

Changed to: _____

Comments: Well owner's address given on internet is
2589 220th St, Marion, KS.

verification method: Written & legal descriptions, well owner's address & area
map on internet, and Marion, Lincolnville SW, & initials: ORL date: 2/25/2002
Lincolnville 1:24,000 topo. maps.

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

1 LOCATION OF WATER WELL: County: Marion Fraction: 2 1/4 Section Number: 20 Township Number: T 18-19 S Range Number: R 5-30-96

Distance and direction from nearest town or city street address of well if located within city?
5 E 3 N Marion

2 WATER WELL OWNER: Darrel Helmer
 RR#, St. Address, Box #: RR 3 Box 105
 City, State, ZIP Code: Marion, KS. 66861
 Board of Agriculture, Division of Water Resources
 Application Number:

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:

N			
	NW	NE	X
W			E
	SW	SE	
			S

4 DEPTH OF COMPLETED WELL: 121 ft. ELEVATION: _____ ft.
 Depth(s) Groundwater Encountered: 115 ft. 2. _____ ft. 3. _____ ft.
 WELL'S STATIC WATER LEVEL: 20 ft. below land surface measured on mo/day/yr 5-30-96
 Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm
 Est. Yield: 15 gpm; Well water was _____ ft. after _____ hours pumping _____ gpm
 Bore Hole Diameter: 2 1/2 in. to 121 ft., and _____ in. to _____ ft.
 WELL WATER TO BE USED AS:
 1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)
 2 Irrigation 4 Industrial 7 Lawn and garden only 10 Monitoring well
 Was a chemical/bacteriological sample submitted to Department? Yes _____ No X; If yes, mo/day/yr sample was submitted _____
 Water Well Disinfected? Yes X No _____

5 TYPE OF BLANK CASING USED:
 1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued X Clamped _____
 2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded _____
 7 Fiberglass Threaded _____
 Blank casing diameter: 5 in. to 100 ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft.
 Casing height above land surface: 12 in., weight Class 160 lbs./ft. Wall thickness or gauge No. 214
 TYPE OF SCREEN OR PERFORATION MATERIAL:
 1 Steel 3 Stainless steel 5 Fiberglass 7 PVC 10 Asbestos-cement
 2 Brass 4 Galvanized steel 6 Concrete tile 8 RMP (SR) 11 Other (specify) _____
 9 ABS 12 None used (open hole)
 SCREEN OR PERFORATION OPENINGS ARE:
 1 Continuous slot 3 Mill slot 5 Gauzed wrapped 8 Saw cut 11 None (open hole)
 2 Louvered shutter 4 Key punched 6 Wire wrapped 9 Drilled holes
 7 Torch cut 10 Other (specify) _____
 SCREEN-PERFORATED INTERVALS: From 100 ft. to 121 ft. From _____ ft. to _____ ft.
 From _____ ft. to _____ ft. From _____ ft. to _____ ft.
 GRAVEL PACK INTERVALS: From 23 ft. to 121 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 _____
 Grout Intervals: From 0 ft. to 23 ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.
 What is the nearest source of possible contamination:
 1 Septic tank 4 Lateral lines 7 Pit privy 10 Livestock pens 14 Abandoned water well
 2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 15 Oil well/Gas well
 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer storage 16 Other (specify below)
 13 Insecticide storage
 Direction from well? E How many feet? Will be 75+

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	10	Clay			
10	27	Lime			
27	42	Red Shale			
42	70	Hard Lime			
70	95	Red Shale			
95	105	Gray Rock			
105	115	Lime			
115	116	Water			
116	121	Gray Rock			

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/year) 5-30-96 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 100 This Water Well Record was completed on (mo/day/yr) 6-12-96 under the business name of Backhus Drilling by (signature) Darrel Backhus

INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks, underline or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Bureau of Water, Topeka, Kansas 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.