

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

(to rectify lacking or incorrect information)

County: Brown

Location listed as:

Location changed to:

Section-Township-Range: None Given

23-15-18E

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

SW SE SW

Other changes: Initial statements: Doniphan County

Changed to: Brown County

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

verification method: Latitude & longitude, conversion tool on KGS website,  
and White Cloud 1:24,000 topo map.

initials: DR date: 2/16/2006

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>Doniphan</u>	Fraction <u>1/4</u> <u>1/4</u> <u>1/4</u>	Section Number	Township Number T <u>S</u>	Range Number R <u>E/W</u>
Distance and direction from nearest town or city street address of well if located within city?		<b>Global Positioning Systems</b> (decimal degrees, min. of 4 digits) Latitude: <u>N 39° 56' 40.7"</u> Longitude: <u>W 95° 22' 18.9"</u> Elevation: _____ Datum: _____ Data Collection Method: _____		

**2 WATER WELL OWNER:** Dave Wamsley  
RR#, St. Address, Box # : 6236 N. Wheeling Ave.  
City, State, ZIP Code : Kansas City, MO 64119

<b>3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:</b> N W S	<b>4 DEPTH OF COMPLETED WELL</b> ..... <u>98</u> ..... ft. Depth(s) Groundwater Encountered (1)..... <u>50</u> ..... ft. (2)..... ft. (3)..... ft. WELL'S STATIC WATER LEVEL..... <u>49</u> ..... ft. below land surface measured on mo/day/yr. <u>11/23/05</u> Pump test data: Well water was.....ft. after..... hours pumping..... gpm Est. Yield... <u>10</u> ...gpm: Well water was.....ft. after..... hours pumping..... gpm WELL WATER TO BE USED AS: 5 Public water supply    8 Air conditioning    11 Injection well <input checked="" type="checkbox"/> 1 Domestic    3 Feedlot    6 Oil field water supply    9 Dewatering    12 Other (Specify below) 2 Irrigation    4 Industrial    7 Domestic (lawn & garden)    10 Monitoring well Was a chemical/bacteriological sample submitted to Department? Yes ..... No <input checked="" type="checkbox"/> .....; If yes, mo/day/yr Sample was submitted..... Water well disinfected? Yes <input checked="" type="checkbox"/> ..... No .....
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**5 TYPE OF 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 60 ..... Threaded.....  
Blank casing diameter ..... 5 ..... in. to ..... 60 ..... ft., Diameter. 60 in. to 88 ft., Diameter ..... in. to ..... ft.  
Casing height above land surface..... 24 ..... in., Weight. 2.65 lbs./ft. Wall thickness or guage No. SDR 21  
TYPE OF SCREEN OR PERFORATION MATERIAL:  
1 Steel    3 Stainless Steel    5 Fiberglass     7 PVC    9 ABS    11 Other (Specify) .....  
2 Brass    4 Galvanized Steel    6 Concrete tile    8 RM (SR)    10 Asbestos-Cement    12 None used (open hole)  
SCREEN OR PERFORATION OPENINGS ARE:  
1 Continuous slot    3 Mill slot    5 Guazed wrapped    7 Torch cut    9 Drilled holes    11 None (open hole)  
2 Louvered shutter    4 Key punched    6 Wire wrapped     8 Saw Cut    10 Other (specify) .....  
SCREEN-PERFORATED INTERVALS: From..... 50 ..... ft. to ..... 60 ..... ft., From ..... 88 ..... ft. to ..... 98 ..... ft.  
From..... ft. to ..... ft., From ..... ft. to ..... ft.  
GRAVEL PACK INTERVALS: From..... 28 ..... ft. to ..... 98 ..... 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 ..... 4 ..... ft. to ..... 28 ..... 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    13 Insecticide Storage    16 Other (specify below)  
2 Sewer lines    5 Cess pool    8 Sewage lagoon    11 Fuel storage    14 Abandoned water well  
3 Watertight sewer lines    6 Seepage pit    9 Feedyard    12 Fertilizer Storage    15 Oil well/gas well  
Direction from well? ..... How many feet? .....

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	5	No sample	93	95	Clay-gray
5	25	Silty clay - Brn	95	98	Shale
25	35	Sandy clay - Brn			
35	42	sand - Brn VF-Med			
42	50	Sandy clay - Brn			
50	58	sand - Brn VF-C			
58	59	Sandy clay - gray			
59	81	Sandy clay - gray			
81	90	Sandy clay - DK. Brn			
90	93	gravel - Brnish gray			

**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) 11/23/05 and this record is true to the best of my knowledge and belief.  
Kansas Water Well Contractor's License No. 308 This Water Well Record was completed on (mo/day/year) 12/12/05  
under the business name of Buschek Drilling Co. by (signature) [Signature]

**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, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well. Visit us at <http://www.kdhe.state.ks.us/geo/waterwells>.