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

(to rectify lacking or incorrect information)

Location listed as:	County: Don Phan Location changed to:
Section-Township-Range: 26-155-19E	26-15-19E
Fraction (1/4 1/4 1/4):	NE SW NW
Other changes: Initial statements:	
Changed to:	
· ·	
Comments:	
verification method: Written & legal de scription	on, county name, position
on plat map, and mapping too,	1 & aerial photos on
Kas website.	initials: (2) RA date: 5/13/2009
Submitted by Venera Coolegical Summer Data Barrery L. 1999 Co	' /

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.

		WA	ATER WELL REC	ORD	Form	WWC-	5 KSA 82	a-1212	ID No	D.					
	ION OF WA	TER WELL:	Fraction					Section Nur			nship Nur	nber	R	ange Num	ber
County:		.phan	NE 14	-	1/4	NW	1/4	26		Т	15	s	R	19E	E/W
			wn or city street												
$2\frac{1}{2}$ mil	es sou	ith and 2	2 miles e	<u>east</u>	of I	Whit	e Clou	<u>d</u>							
2 WATER	R WELL OW		McCaule												
RR#, St. Ad City, State,	ddress, Box ZIP Code		Ash Poi e Cloud,			94					ard of Agri dication N		Division o	f Water Re	esources
3 LOCATE	WELL'S LC	CATION WITH		OMPLE	TED W	ELL	1.68	ft. E	LEVAT						
	N SECTION		_	ndwater	Encoun	tered	1		ft.	2	• • • • • • • • • • • • • • • • • • • •	ft.	3		ft.
<u> </u>	N I	1	Depth(s) Groud WELL'S STATI	C WATE	RLEVE	<u> </u>).]ft. b	elow land	surface	e measure	d on mo/o	day/yr	5-1-	.08	
	1 -	1	Est. Yield	mp test o 12	data: \	Nell wa	ter was	•••••	ft. a	ifter		. hours	pumping.	••••••	gpm
	-NM -	- NE	WELL WATER	TO BE	JSED A	NGII WA NS: 5	El was Public wate	er supply	II. a	8 Air con	ditionina		Injection v		gpm
	×	,	1 Domestic	3 1	Feedlot	ϵ	Oil field wa	ter supply		9 Dewate	ering	12	Other (Sp	ecify belov	
l w⊢	- 	- i E	2 Irrigation	4 1	Industria	al 7	Domestic (lawn & gar	den)	10 Monitor	ring well				
	1	1													
	-sw -	- SE	Was a chemica	al/bacteri	iologica	l sample	e submitted t	o Departm							was sub-
	;	,	mitted						Wa	ater Well D	isinfected	? Yes	x	No	
	S										*				
5 TYPE (CASING USED:			ught iro			crete tile		CAS	ING JOIN		≱ed		
2 PVC		3 RMP (S 4 ABS	ri)	7 Fibe	estos-C eralass	ement		er (specify	,				elded readed		
Blank casir	ng diameter	5	in. to		f	ft Dia .		in to			ft Dia	×Σ	88x	in to	ft
Casing hei	ght above la	ınd surface	24	in.,	weight			2.82		lbs./ft. Wal	I thicknes	s or qu	age No	258	
TYPE OF S	SCREEN OF	R PERFORATIO	N MATERIAL:		Ū			PVC			10 Asbe				
1 Stee		3 Stainles			erglass			RMP (SR)			11 Other	r (Speci	fy)		
2 Bras		4 Galvaniz		6 Con	crete til	е	9 /	ABS			12 None	used (open hole)		
		RATION OPENII					azed wrappe	d		8 Saw c			11 Nor	ne (open h	ole)
	tinuous slot vered shutte		fill slot (ey punched				e wrapped ch cut			9 Drilled					44
				53					_		,				
SCHEEN-	PERFORALI	ED INTERVALS	: From1			π. το ft to		π.,	From	••••••		ft. #	to to	•••••	ft.
(GRAVEL PA	CK INTERVALS	6: From2.	5		ft. to	1.68	ft.,	From			ft.	to		ft.
			From			ft. to		ft.,	From			ft.	to	•	ft.
6 GROU	T MATERIA	L: 1 Nea	it cement	2 C	ement o	arout	3 B	entonite		Other					
_	vals: Fror	n0	ft. to2	5	ft Fron	n	f	t. to		ft. Fro		• • • • • • • • • • • • • • • • • • • •	ft to		ft
What is the	e nearest so	urce of possible	contamination:		,			10	Livest	ock pens			Abandone		
1 Sep	tic tank	4 Late	ral lines		7	Pit priv	y	11	Fuel s	torage		15	Oil well/G	as well	
	ver lines	5 Cess	•		8 Sewage lagoon			12	Fertiliz	zer storage)	16	Other (sp	ecify belov	v)
		er lines 6 Seep	page pit		9	Feedya	ard	13	Insect	icide stora	ge .	ope	en fie	ld	
Direction fr		T						Hov	w man	y feet?					
FROM	TO		LITHOLOGIC	CLOG	_		FROM	то			PLUC	GING	INTERVAL	.S	
0	45	brown l													
45	101		own silt	У			-		-						
101 145	145 158		te grey urse san	d br	or.m				_	-					
158	168		mestone	d DI	OWII			-	_						-
130	100	grey ii	mescone					+	_						
<u> </u>											··				
1 5								-							
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				-											
										~	* *				
											**				
⁷ contr.	ACTOR'S C	R LANDOWNE	R'S CERTIFICA	TION: T	his wate	er well	was (1) cons	structed. (2	2) reco	nstructed.	or (3) plu	ıgged u	nder mv i	urisdiction	and was
completed of	on (mo/day/y	rear)⊃	.00					and t	this red	ord is true	to the bes	at of my	knowledge	and belief	i. Kansas
		Licence No	182		Tr	nis Wate	er Well Reco	rd was con	npleted	d on (mo/d	ay/yr)	8-	-25-08	5	
	usiness nam		rader Dr							signature).	الحرا	ac	er		
INSTRUCT	TIONS: Use type	ewriter or ball point peof Water. Geology Se	en. <i>PLEASE PRESS F</i> ection, 1000 SW Jacks	FIRMLY and	PRINT cl	early. Plea	ase fill in blanks,	underline or ci	ircle the	correct answe	rs. Send too	maree cop	ies to Kansas	Department o	of Health
records. Fe	e of \$5.00 for e	ach constructed well		on on, out	ال) الك	ona, nam	oud 00012*100/.	reiehilotte 18	~-∠ 20- 00	عدد. ع و ااتا 1916	O WAITER !	WELL OW	nuch and reta	one for you	Я