CORRECTION(S) TO WATER WELL RECORD (WWC-5) (to rectify lacking or incorrect information) County: Marion Location changed to: Location listed as: Section-Township-Range: Other changes: Initial statements: Mc Pherson County Changed to: Marion County Comments: verification method: written & legal descriptions, and mapping tool on KGS website.

initials: OR date: 6/20/2006

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 R	ECORD	Form WWC-	5	Division of V	Vater Resources; App. 1	No
1 LOCATION OF Y	VATER WELL:	Fraction	S	ection Number	r Township Num	ber Range Number
County: Mr I	hersan	Fraction Pe 1/4 M	21/4		T 20 S	R (EDW
Distance and direction from nearest town or city street address of well if Global Positioning Systems (decimal degrees, min. of 4 digits)						
located within city?		.,				-
420 N	т					
2 WATER WELL OWNER: JEYOL MEY Schroeder RR#, St. Address, Box # : Box 134				Longitude:		
RR# St Address Boy #			<u> </u>	Elevation:		
City State ZID Co	$BOX^{\#}: BOY /-$	37		oatum:		
City, State, ZIP Co	de GAOSSO	21. KQ,		Data Collecti	on Method:	
City, State, ZIP Code : Cooge, Kg, Data Collection Method: 3 LOCATE WELL'S 4 DEPTH OF COMPLETED WELL						
LOCATION			A			
WITH AN "X" IN	Denth(s) Groundwater	Encountered (1)	20	ft (2)	ft	(3) ft
SECTION BOX:	WELL'S STATIC WA	TER LEVEL	f h	elow land sur	face measured on mo	(3)ft. /day/yr. 5-23-06
N N	Pump test data	· Well water was		ft after	hours numni	ng gpm
	Fet Vield 2 7 gram	. Well water was		ft after	hours pumpi	ng gpm
	WELL WATER TO B	E HEED AC. 5 Dubli	a xxxatan ay	nnler 0	Air conditioning	1 Injection well
NW NE		E USED AS: 5 FUUII	c water su	ppry o	An conditioning 1.	2 Other (See a if the lease)
W E 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						
	2 Irrigation 4 Ind	ustriai / Domestic	c (lawn &	garden) 10 1	Monitoring well	•••••
SW SE						
Sample was submitted						
S						
5 TYPE OF CASINO	G USED: 5 Wrought 1	Iron 8 Concr	ete tile	CAS	SING IOINTS: Glue	d Clamped
	MP (SR) 6 Asbestos-		(specify b			led
Blank casing diameter	BS 7 Fiberglass 7	ft Diameter	in	to.	ft Diameter	in to ft
Casing height above to	and surface	in Waight	722 "h	sc /ft W/ol	thickness or succe.	J. 2/6
Type of copern o	R PERFORATION MATE	III., Weign →	1.	08./11. Wai	i unckness or guage i	No. 45.77
I .			0.40	NG.	11.04 (0	· c >
I .						ify)
		rete tile 8 RM (SR)	10 As	sbestos-Ceme	nt 12 None used (open hole)
1	RATION 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 ft. to ft. to ft.						
From						
GRAVEL PACK INTERVALS: From ft. to ft. to ft., From ft., From ft. to ft.						
From ft. to ft., From ft. to ft.						
6 GROUT MATERI	AL: 1 Neat cement 2	Cement grout 3 Ber	tonite 4	Other		
			ft	. to	ft., From	ft. toft.
What is the nearest so	urce of possible contaminat	ion:				
1 Septic tank 4 Lateral lines 7 Pit privy 10 Livestock pens 13 Insecticide Storage 16 Other (specify						
2 Sewer lines	5 Cess pool		1 Fuel stor		4 Abandoned water w	
3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer Storage 15 Oil well/gas well						
Direction from well? .						
FROM TO	LITHOLOGIC		FROM	TO		INTERVALS
0 13- (Jan V		1110111		120001110	
V /3 C	icy					
15 25- 5	2 1 0/2					
12 00 0	anay Cracy					
23-45-	0- 1/2-	40.				
25 70	sundriva	ter	_			
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) 5-23-06. and this record is true to the best of my knowledge and belief.						
Kansas Water Well Contractor's License No						
under the business name of Backhus Drilling by (signature) Sault. Bankue						
INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PAINT 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.						