County: Chase Fraction SESENENE Sec. 26 T 22 S	R = G = EW
CORRECTION(S) TO WATER WELL COMPLETION RECORD (WWC-5)  (to rectify lacking or incorrect information)  Owner:	
Location was listed as:  Location changed to:	
Section-Township-Range: 16-245-5 = 26-225-	6E
Fraction (1/4 1/4 1/4):	freeze
Other changes: Initial statements: Marton County	
Changed to: Chase County	
Comments:	
Verification method: Well owner's address, area road map; owner ship map, and mapping tool & aerial pho	county
owner ship map, and mapping tool & aerial pho	ros on
Submitted by: Kansas Geological Survey, Data Resources Library, 1930 Constant Ave., Lawrence, KS 66047-372 to: Kansas Dept of Health & Environment, Bureau of Water, 1000 SW Jackson, Suite 420, Topeka, KS 66612-136	11/7/2012

WATER WELL RECORD	Form WWC-5	Division of Wate	r Resources App. N	0.	
1 LOCATION OF WATER WELL:		Section Number	Township No.	Range Number	
County: Mallow of Wall Looking	1/4 SE 1/4 NW 1/4 NE		T 2 4 S	R 3 DE DW	
Street/Rural Address of Well Location from pearest town or intersection. If a		Global Positioning			
nom nearest town or mersection. It a	from nearest town or intersection: If at owner's address, check here Latitude:				
		Elevation:			
2 WATER WELL OWNER: 12 - 6	141 + 11	Datum: WGS 84	4, □ NAD 83, □	NAD 27	
RR#. Street Address. Box #: DOD	Walkins	Collection Method:	ra/Modal:	,	
City, State, ZIP Code 2 274	WATER WELL OWNER: Bob Watkins RR#, Street Address, Box #: 274 G Road City, State, ZIP Code 274 G Road Barns Kan 66840		☐ GPS unit (Make/Model:) ☐ Digital Map/Photo, ☐ Topographic Map, ☐ Land Survey		
Barns	Kan 66640	Est. Accuracy: <a> </a> <a> </a> <a> <a> <a> <a> <a> <a> <a> <a> <a> &lt;</a></a></a></a></a></a></a></a></a>			
3 LOCATE WELL					
WITH AN "X" IN SECTION BOX:  Output  O					
N WELL'S STATIC WATER LEVEL 60ft. below land surface measured on mo/day/yr					
Pun	p test data: Well water was	ft. after	hours pum	ping gpm	
EST. YIELD 25gpm, Well water was					
W Bore Hole Diameter in. to 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)					
SWSE   Domestic   Feedlot   Oli field water supply   Dewatering   Other (Specify below)					
	ıl/bacteriological sample submitted	to Department?			
	o/day/yr sample was submitted		•		
Water well dis	infected? X Yes  No				
5 TYPE OF CASING USED:   Ste			•••••		
CASING JOINTS: A Glued Cla	amped Welded Thread	ed	•		
Casing diameter	in Weight	1. to It., D	lameter	in. to It.	
Casing diameter in. to	N MATERIAL:	108./10., wan unc	Alless of gauge iv	0. <i>f. &amp; N f</i>	
Steel Stainless Steel	N PVC	Other (Specify)			
Brass Galvanized Steel	None used (open hole)				
SCREEN OR PERFORATION OPENIN  Continuous slot Mill slot		☐ Drilled holes	☐ None (open hol	e)	
Louvered shutter Key punched	Wire wrapped Saw cut	Other (specify)			
Louvered shutter Key punched Wire wrapped Saw cut Other (specify)  SCREEN-PERFORATED INTERVALS: From ft. to ft., From ft. to ft.					
CDANEL DACK DITEDMALC	From ft. to	ft., From	ft.	to ft.	
GRAVEL PACK INTERVALS:	From. 40 ft. to	ft From	II. ft	to It.	
6 GROUT MATERIAL: Neat cer	nent □ Cement grout 🐼 Ben	onite		11.	
Grout Intervals: From . 3 ft.	to 23 ft., From	ft. to ft.,	From	ft. toft.	
What is the nearest source of possible con	***************************************	********	-		
Septic tank Lateral I Sewer lines Cesspoo	ines Pit privy Livestoc  Sewage lagoon Fuel stor			ner (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			20		
FROM TO LITHOLO	GIC LOG FROM	TO LITHO. LO	OG (cont.) <u>or</u> PLU	JGGING INTERVALS	
0 3 5012		777777777		744	
3 23 CLAY	4310			· · · · · · · · · · · · · · · · · · ·	
23 145 Line + S	TULE				
			***************************************	677-1701 F - 71071 611 6 T - Aud 611	
40.00					
		<u> </u>		¥.	
7 CONTRACTOR'S OR LANDOWNE	PP'S CERTIFICATION. This	nter well was 7 const-	noted Traconst	noted or Dalugged	
under my jurisdiction and was completed on (mo/day/year) 2 and this record is true to the best of my knowledge and belief					
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, or plugged under my jurisdiction and was completed on (mo/day/year) 2					
under the business name of Winter Well Wrilliam by (signature)					
INSTRUCTIONS: Use typewriter or ball point pen. <u>PLEASE PRESS FIRMLY</u> and <u>PRINT</u> learly. 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 WA	ATER WELL OWNER and retain one fo	your records. Include fee	of \$5.00 for each c	constructed well. Visit us at	
http://www.kdheks.gov/waterwell/index.html.				March 200 and a state of the st	
KSA 82a-1212					