

County: Harvey Fraction E2 SW SW SW Sec. 8 T 23 S R 1 (EAW)

CORRECTION(S) TO WATER WELL COMPLETION RECORD (WWC-5)
(to rectify lacking or incorrect information)

Owner: Mark Anton

Location was listed as:

Section-Township-Range: None Given

Fraction (1/4 1/4 1/4): _____

Location changed to:

8-23S-1E

E2 SW SW SW

Other changes: Initial statements: No county given

Changed to: Harvey County

Comments: _____

Verification method: Wellsite address, city street map, and mapping tool & aerial photos on KGS website.

initials: ORA date: 12/31/2015

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

Original Record Correction Change in Well Use

Division of Water Resources App. No.

Well ID

1 LOCATION OF WATER WELL: County: _____	Fraction ¼ ¼ ¼ ¼	Section Number	Township Number T S	Range Number R <input type="checkbox"/> E <input type="checkbox"/> W
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2 WELL OWNER: Last Name: Anton First: Mark
 Business: 9200 County Ln
 Address: Newton State: KO ZIP: 67114
 Street or Rural Address where well is located (if unknown, distance and direction from nearest town or intersection): If at owner's address, check here:
1304 Maple

3 LOCATE WELL WITH "X" IN SECTION BOX:

N

NW	NE
SW	SE

S

-----1 mile-----

4 DEPTH OF COMPLETED WELL: 90 ft.
 Depth(s) Groundwater Encountered: 1) 27 ft.
 2) 75 ft. 3) _____ ft., or 4) Dry Well
 WELL'S STATIC WATER LEVEL: 25 ft.
 below land surface, measured on (mo-day-yr).
 above land surface, measured on (mo-day-yr). 7-21-15
 Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm
 Well water was _____ ft. after _____ hours pumping _____ gpm
 Estimated Yield: 10-20 gpm
 Bore Hole Diameter: 9.75 in. to 3.5 ft. and 7.2 in. to 9.0 ft.

5 Latitude: _____ (decimal degrees)
Longitude: _____ (decimal degrees)
 Datum: WGS 84 NAD 83 NAD 27
 Source for Latitude/Longitude:
 GPS (unit make/model: _____) (WAAS enabled? Yes No)
 Land Survey Topographic Map
 Online Mapper: _____

6 Elevation: _____ ft. Ground Level TOC
 Source: Land Survey GPS Topographic Map
 Other _____

7 WELL WATER TO BE USED AS:

1. Domestic: <input type="checkbox"/> Household <input checked="" type="checkbox"/> Lawn & Garden <input type="checkbox"/> Livestock 2. <input type="checkbox"/> Irrigation 3. <input type="checkbox"/> Feedlot 4. <input type="checkbox"/> Industrial	5. <input type="checkbox"/> Public Water Supply: well ID _____ 6. <input type="checkbox"/> Dewatering: how many wells? _____ 7. <input type="checkbox"/> Aquifer Recharge: well ID _____ 8. <input type="checkbox"/> Monitoring: well ID _____ 9. Environmental Remediation: well ID _____ <input type="checkbox"/> Air Sparge <input type="checkbox"/> Soil Vapor Extraction <input type="checkbox"/> Recovery <input type="checkbox"/> Injection	10. <input type="checkbox"/> Oil Field Water Supply: lease _____ 11. Test Hole: well ID _____ <input type="checkbox"/> Cased <input type="checkbox"/> Uncased <input type="checkbox"/> Geotechnical 12. Geothermal: how many bores? _____ a) Closed Loop <input type="checkbox"/> Horizontal <input type="checkbox"/> Vertical b) Open Loop <input type="checkbox"/> Surface Discharge <input type="checkbox"/> Inj. of Water 13. <input type="checkbox"/> Other (specify): _____
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Was a chemical/bacteriological sample submitted to KDHE? Yes No If yes, date sample was submitted: _____
 Water well disinfected? Yes No

8 TYPE OF CASING USED: Steel PVC Other _____ CASING JOINTS: Glued Clamped Welded Threaded
 Casing diameter 5 in. to 9.75 ft., Diameter _____ in. to _____ ft., Diameter _____ in. to _____ ft.
 Casing height above land surface 12 in. Weight SDR 26 lbs./ft. Wall thickness or gauge No. 21.5
 TYPE OF SCREEN OR PERFORATION MATERIAL:
 Steel Stainless Steel Fiberglass PVC Other (Specify) _____
 Brass Galvanized Steel Concrete tile None used (open hole)
 SCREEN OR PERFORATION OPENINGS ARE:
 Continuous Slot Mill Slot Gauze Wrapped Torch Cut Drilled Holes Other (Specify) _____
 Louvered Shutter Key Punched Wire Wrapped Saw Cut None (Open Hole)
 SCREEN-PERFORATED INTERVALS: From 15 ft. to 35 ft., From 70 ft. to 90 ft., From _____ ft. to _____ ft.
 GRAVEL PACK INTERVALS: From _____ ft. to _____ ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.

9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other _____
 Grout Intervals: From 0 ft. to 20 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 Nearest source of possible contamination:
 Septic Tank Lateral Lines Pit Privy Livestock Pens Insecticide Storage
 Sewer Lines Cess Pool Sewage Lagoon Fuel Storage Abandoned Water Well
 Watertight Sewer Lines Seepage Pit Feedyard Fertilizer Storage Oil Well/Gas Well
 Other (Specify) _____
 Direction from well? W Distance from well? 40+ ft.

10 FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
0	10				
10	15	Fine Sand			
15	19	Clay			
19	24	med sand			
24	73	Blue Shale			
73	75	Crumbled Shale + Water			
75	90	Gray Shale			
Notes:					

11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, or plugged under my jurisdiction and was completed on (mo-day-yr) 7-21-15 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 180 This Water Well Record was completed on (mo-day-yr) 7-26-15 under the business name of BAC KNS Drilling