

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

(to rectify lacking or incorrect information)

Location listed as:

Section-Township-Range: _____

Fraction ($\frac{1}{4}$ $\frac{1}{4}$ $\frac{1}{4}$): _____County: HarveyLocation ~~changed to~~:24-24S-1ENW SE SE

Other changes: Initial statements:

Sedgwick County

Changed to:

Harvey County

Comments: _____

verification method:

Legal description, position on plat map, and property descriptions for well owner on Harvey County website.initials: DRL date: 5/15/2007

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.

1 LOCATION OF WATER WELL:		Fraction		Section Number	Township Number		Range Number																																																																			
County: Sedgwick		NW ¼ SE ¼ SE ¼		24	T 24 S		R 1 E/W																																																																			
Distance and direction from nearest town or city street address of well if located within city?				Global Positioning System (decimal degrees, min. of 4 digits)																																																																						
2 WATER WELL OWNER: Klee R Watchous RR#, St. Address, Box # : 4924 SE 84 th St City, State, ZIP Code : Newton, KS 67114				Latitude: _____																																																																						
				Longitude: _____																																																																						
				Elevation: _____																																																																						
				Datum: _____																																																																						
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: <div style="text-align: center;"> </div>				4 DEPTH OF COMPLETED WELL 85 ft.																																																																						
				Depth(s) Groundwater Encountered _____ ft. 2 _____ ft. 3 _____ ft. WELL'S STATIC WATER LEVEL 23 ft. below land surface measured on mo/day/yr Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm Est. Yield 6 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 1 Domestic 3 Feed lot 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 x ; If yes, mo/day/yr Sample was submitted _____ Water Well Disinfected? Yes x No _____																																																																										
5 TYPE OF CASING USED: <table style="width: 100%;"> <tr> <td>1 Steel</td> <td>3 RMP (SR)</td> <td>6 Asbestos-Cement</td> <td>8 Concrete tile</td> <td colspan="2">CASING JOINTS: Glued x Clamped _____</td> </tr> <tr> <td>2 PVC</td> <td>4 ABS</td> <td>7 Fiberglass</td> <td>9 Other (specify below) _____</td> <td colspan="2">Welded _____</td> </tr> <tr> <td colspan="4"></td> <td colspan="2">Threaded _____</td> </tr> </table> Blank casing diameter 5 in. to 20 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft. Casing height above land surface 12 in., Weight 2.40 lbs./ft. Wall thickness or gauge No. 160psi									1 Steel	3 RMP (SR)	6 Asbestos-Cement	8 Concrete tile	CASING JOINTS: Glued x Clamped _____		2 PVC	4 ABS	7 Fiberglass	9 Other (specify below) _____	Welded _____						Threaded _____																																																	
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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 Gauge 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 20 ft. to 85 ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.																																																																										
GRAVEL PACK INTERVALS: From 20 ft. to 85 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 3 ft. to 20 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? East How many feet? 200ft.																																																																										
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>FROM</th> <th>TO</th> <th>LITHOLOGIC LOG</th> <th>FROM</th> <th>TO</th> <th>PLUGGING INTERVALS</th> </tr> </thead> <tbody> <tr> <td>0</td> <td>1</td> <td>Top Soil</td> <td></td> <td></td> <td></td> </tr> <tr> <td>1</td> <td>19</td> <td>Clay</td> <td></td> <td></td> <td></td> </tr> <tr> <td>19</td> <td>85</td> <td>Shale</td> <td></td> <td></td> <td></td> </tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> </tbody> </table>									FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS	0	1	Top Soil				1	19	Clay				19	85	Shale																																													
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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) 3-22-2007 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 740 . This Water Well Record was completed on (mo/day/year) 3-29-2007 under the business name of Weninger Drilling Inc. by (signature) _____																																																																										

INSTRUCTIONS: Please fill in blanks 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.kdheks.gov/waterwell>.