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

(to rectify lacking or incorrect	information)
Location listed as:	County: Harvey Location changed to:
Section-Township-Range:	19-245-2E
Fraction (1/4 1/4 1/4):	NE SW SW
Other changes: Initial statements: Sedgwick Co	nunty
Changed to: Harvey County	
Comments:	
verification method: Legal description, property descriptions for well or	osition on plat map, and when on Harvey County 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.

		RECORD						urces; App. No			
1 LOCA County:	ATION OF	WATER WELL: sedgwick on from nearest town	Eraction /4	JY " S)	1 /4	Section Nu 19	ımber	Township N T 24	umber S	Rang R	e Number 2 Ew
Distance a located w	and direction ithin city?	on from nearest town	or city street	'address of		Hobal Posi Latitude: Longitude			mal deg	rees, mir	ı. of 4 digits)
2 WAT	ER WELL	OWNER: Klee R	Watchous			Elevation:					
RR#, 8	St. Address	Box # : 4924 SI	E 84 th st			Datum:					
City, S	state, ZIP C	ode : Newton	, KS 67114			Data Colle	ection M	lethod:			,
		L'S 4 DEPTH OF	COMPLET	ED WELL	4 <u>90</u> 1	ft.					
LOCA		2 4 () 6							0 0		^
ì	I AN "X"	1 1 1	dwater Enco	untered l		::	_ft. 2_		ft. 3		ft.
SECT	ION BOX	: WELL'S STAT	IC WATER	LEVEL 2	2	. below lar	nd surta	ce measured o	on mo/c	iay/yr 	
,	N .	Pump	test data:	Well water v	vas	tt.	after	hours	pump	ing	gpm
	!	Est. Yield 30	gpm: \	Well water v	vas	tt.	after	hours	pump	ing	gpm gpm
X HW	V	WELL WATER	C TO BE US	ED AS: 5 I	Public wa	iter supply	8 A11	conditioning	11 h	njection	well
w		E 1 Domestic 3 2 Irrigation 4	reed lot	Sil field w	ater supp	oly	9 Dewa	itering	12 Oth	er (Spec	city below)
		2 Irrigation 4	industriai 🗸	Jomestic (lawn & g	garden) i	U Moni	toring well			
sy	v	N/	1/14:-1:	11-		1 4 - D	40	37 NI.		16	
نا ا		Was a chemical	/bacteriologi	cai sample	submitted	to Depart	ment?	Yes No) X ;	if yes, n	no/day/yrs
	S	Sample was sub									
5 TYPE	OF CASI	NG USED: 5	Wrought Iro	n 8	Concre	te tile	CASI	NG JOINTS:	Glued	x Cl	amped
→ Ste	eel	3 RMP (SR) 6	Asbestos-Ce	ment 9	Other (specify bel	ow)		Welde	d	
2 2 2 2 2	10	A ADC 7	Dillore Inc.						771	1.1	
Blank cas	ing diamete	er 5 in. to 2	20 ft.,	, Dia	i	n. to	ft.,	Dia	in.	to	ft.
Casing he	ight above	er 5 in. to 2 land surface 12	in., We	eight	2.40	lbs./	ft. Wal	l thickness or	gauge l	No.	160psi
TYPE OF	SCREEN	OR PERFORATION inless steel 5 Fib vanized steel 6 Co	MATERIA	b ;							
1 Ste	eel 3 Sta	inless steel 5 Fib	erglass (7)PVC	9 A	BS		11 Other (sp	ecify)		
2 Br	ass 4 Gal	vanized steel 6 Co	ncrete tile 8	RM (SR)	10 A	sbestos-Ce	ement	12 None use	d (ope	n hole)	
2 Lo	uvered shu	ot 3 Mill slot tter 4 Key punche ATED INTERVALS:	d 6 Wire	wrapped	8 Saw	Cut 1	0 Other	(specify)	IVOIL	(open n	ioic)
SCREEN-	-PERFORA	TED INTERVALS:	From	20	ft. to	90	ft. Fro	om	ft. t	0	ft.
			From		ft. to		ft. Fro	om	ft. t	0	ft.
GR	AVEL PA	CK INTERVALS:	From	20	ft. to	90	ft. Fro	om	ft. t	0	ft.
			From		ft. to		ft. Fro	om	ft. t	0	ft.
6 CDOI	IT MATE	CK INTERVALS:	ant 2 Cam	ant anaut	(2) Ponto		Othor				
Oncut Inte	UI WIALK	RIAL: 1 Neat cem	ent 2 Cem	ent grout	Benc	onite 4	Other			G. 4	<u>-</u>
What is th	rvais r	ource of possible con	LU II.	rrom	IL.	10	Il.	rrom		, IL. 10 .	H.
	tic tank	-	itanimation. ies 7 Pit priv	rs: 16) Livesto	ok nane	12 Inco	cticide Storag		16 Oth	er (specify
	ver lines	5 Cess pool		e lagoon 1				ndoned water			ow)
		er lines 6 Seepage p						well/ gas well		OCI	<i>,</i>
	from well?		> 1000,0			feet? 300					
FROM	ТО		OGIC LOG		······································			DLUCCIN	G INITI	CDVAI	c c
0	10	Top Soil	JOGIC LOG		FROM	TO		PLUGGIN	O IN II	CKVAL	3
1	18	Clay				+					
18	19	Fine Sand				1					
19	90	Shale									*******
								<u> </u>			
						1					
	<u> </u>					+					
<u> </u>	 		····		<u> </u>	 		····			
7 CONT	RACTOR:	S OR LANDOWNI	R'S CERT	FICATIO	N: This u	vater well w	a(1) bo	instructed (2) r	econstr	icted or	(3) phiosed
		nd was completed on (1						true to the best			
		ntractor's License No.						on (mo/day/ye			
under the b	usiness nam	e of Weninger Dril		-	by (signat		-				
		e fill in blanks or circle th					artment o	of Health and Env	ironman	+ Durgou	of Water

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.