County: Greenwood Fraction NW SE Sec. 3 T 25 S R 10 (E) W

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

Owner: Frank Gaines

Location was listed as:		**Location changed to:**
Section-Township-Range:	3-25 S-10	3-25 S-10 E
Fraction (¼ ¼ ¼):	Lot 8	NW SE

Other changes: Initial statements:

Changed to:

Comments:

Verification method: Written & legal descriptions, position on sketch map, and mapping tool on KGS website.

initials: DRA date: 9/14/2012

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.

USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

WATER WELL RECORD
KSA 82a-1201-1215

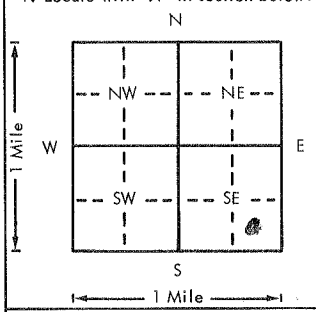
Kansas Department of Health and Environment-Division of Environment
(Water well Contractors)
Topeka, Kansas 66620

1. Location of well:	County: Greenwood	Fraction: Lot 8 (1/4 1/4 1/4)	Section number: 3	Township number: T 25 S	Range number: R 10 E/W

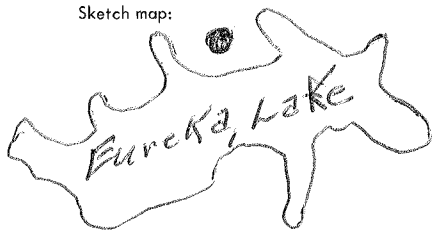
2. Distance and direction from nearest town or city: 5 Miles North of Eureka, Kans
Street address of well location if in city:

3. Owner of well: Frank Gaines
R.R. or street: Box 219
City, state, zip code: Augusta Kans

4. Locate with "X" in section below:



Sketch map:



6. Bore hole dia. 18" in. Completion date 5/18/77
Well depth 100 ft.

7. X Cable tool ___ Rotary ___ Driven ___ Dug
___ Hollow rod ___ Jetted ___ Bored ___ Reverse rotary

8. Use: ___ Domestic ___ Public supply ___ Industry
___ Irrigation ___ Air conditioning ___ Stock
___ Lawn ___ Oil field water ___ Other

9. Casing: Material ___ Height: Above or below
Threaded ___ Welded ___ Surface ___ in.
RMP ___ PVC ___ Weight ___ lbs./ft.
Dia. ___ in. to ___ ft. depth Wall Thickness: inches or
Dia. ___ in. to ___ ft. depth gage No. ___

5. Type and color of material	From	To
Soil	0	3
Lime	3	10
Sandy Loam	10	25
Lime	25	35
Shale	35	65
Lime	65	80
Shale	80	100
(Use a second sheet if needed)		

10. Screen: Manufacturer's name ___
Type ___ Dia. ___
Slot/gauze ___ Length ___
Set between ___ ft. and ___ ft.
___ ft. and ___ ft.
Gravel pack? ___ Size range of material ___

11. Static water level: mo./day/yr.
___ ft. below land surface Date ___

12. Pumping level below land surfaces:
___ ft. after ___ hrs. pumping ___ g.p.m.
___ ft. after ___ hrs. pumping ___ g.p.m.
Estimated maximum yield ___ g.p.m.

13. Water sample submitted: mo./day/yr.
___ Yes ___ No Date ___

14. Well head completion:
___ Pitless adapter ___ Inches above grade

15. Well grouted? ___
With: ___ Neat cement ___ Bentonite X Concrete
Depth: From 0 ft. to 10 ft.

16. Nearest source of possible contamination:
ft. ___ Direction ___ Type ___
Well disinfected upon completion? ___ Yes ___ No

17. Pump: ___ Not installed
Manufacturer's name ___
Model number ___ HP ___ Volts ___
Length of drop pipe ___ ft. capacity ___ g.p.m.
Type:
___ Submersible ___ Turbine
___ Jet ___ Reciprocating
___ Centrifugal ___ Other

T 25 R 10 E/W Sec 3 1/4 1/4 1/4

18. Elevation:

Topography:
___ Hill
___ Slope
___ Upland
X Valley

19. Remarks:
Dry Hole
Plugged Hole With Mud & Cemented Top 10 FT.

20. Water well contractor's certification:
This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.
Business name Eureka Well Service License No. 296
Address Eureka Kansas
Signed Tom Ashbock Date ___
Authorized representative

Forward the white, blue and pink copies to the Department of Health and Environment

Form WWC-5

MI-1023