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

Location listed as:	County: $A/e n$ Location changed to:
Section-Township-Range: $2 - 255 - 19E$	2-255-19E
Fraction (1/4 1/4 1/4):	SW NW NE
Other changes: Initial statements:	
Changed to:	,
Comments:	
verification method: Location and position plugging record, and sequence	on plat map given on latering of wells in this series. initials: Pl date: 3/15/2011

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.

		W	ATER WELL REC	CORD Form WWC-	5 KSA 82a	-1212 ID No.			
		TER WELL:	Fraction			ction Number	Township Number	Range Numb	per
County: F				NW 14 NE		2	T 25 S	R 19E	E/W
2 1200	WELL OW	ely on	wik S		pr, KS		i	andfill Prope	- 1
RR#, St. Ac City, State,	ddress, Box ZIP Code	# : Ane Lista		y Wwthou 10749	8C IN	Washing	Board of Agriculture Application Number	re, Division of Water Res er:	sources
3 LOCATE	WELL'S LC	CATION WITH	4 DEPTH OF C	OMPLETED WELL	52	ft. ELEVATION			
	N SECTION		Depth(s) Groun	ndwater Encountered	1	ft. 2		ft. 3	ft.
	N		WELL'S STATI	C WATER LEVEL	ft. bel	ow land surface	measured on mo/day/yı	·	
	1	X	Pu Fet Viold	mp test data: Well wa	ater was	tt. aft.	er hou	rs pumpingrs pumping	gpm
	-NW -	_NE			5 Public water			1 Injection well	gpm
	<u> </u>	!	1 Domestic	3 Feedlot	6 Oil field wate	r supply 9	Dewatering 1	2 Other (Specify below	()
w -	1		2 Irrigation	4 Industrial	7 Domestic (la	wn & garden) 10	Monitoring well	2455	
	1	1							
	-SW	- SE	Was a chemica mitted	al/bacteriological samp	le submitted to		s No; If ye er Well Disinfected? Yes	s, mo/day/yrs sample w	as sub-
5 TYPE C	OF BLANK (CASING USED:	L	5 Wrought iron	8 Concr	ete tile	CASING JOINTS: (Glued Clamped .	
1 Stee		3 RMP (S	R)	6 Asbestos-Cement		(specify below)		Velded	
2 PVC		4 ABS	,	7 Fiberglass				hreaded🌦	
Blank casin	ng diameter	<i>L</i>	in. to			in. to	ft., Dia	in. to	ft.
1				in., weight	_		s./ft. Wall thickness or o	guage No	
		R PERFORATIO		5	ØP\		10 Asbestos-		
1 Stee 2 Bras		 3 Stainles 4 Galvania 		5 Fiberglass 6 Concrete tile	8 HF 9 AE	MP (SR)	11 Other (Spe 12 None used	ecify)	
								` '	
	tinuous slot	RATION OPENII			azed wrapped re wrapped		8 Saw cut 9 Drilled holes	11 None (open ho	ile)
1	rered shutte		fill slot (ey punched		rch cut				ft.
		ED INTERVALS	•	2 # 10	42	ft From		t. to	4
JOINELIN	2111 0111	-D IIII EIII III							
[GRAVEL PA	CK INTERVALS	: From	7 ft. to	39	ft., From	f	t. to t. to	ft.
			From	ft. to		ft., From	f	t. to	ft.
6 GROU	T MATERIA	L: 1 Nea	t cement	2 Cement grout	(3)Ben	tonite 4 (Other		
Grout Inten	vals: Fror	39	ft. to	3 ft., From	ft.	to	ft From	ft. to	ft.
			contamination:			10 Livestoc		4 Abandoned water we	
1 Sept	tic tank	4 Late	ral lines	7 Pit priv	v	11 Fuel sto	rage 1	5 Oil well/Gas well	
2 Sew	er lines	5 Cess	s pool	8 Sewag	-	12 Fertilize	-	6 Other (specify below))
3 Wate	ertight sewe	r lines 6 Seep	page pit	9 Feedy	ard	13 Insectici		ind Fill	
Direction fro	om well?					How many f	eet?	•	
FROM	TO		LITHOLOGIC	CLOG	FROM	TO	PLUGGING	3 INTERVALS	
0	29	Tan	L.5						
29	50.5	3 hale	•						
50.5	50'8	Coal							
50.8	52	Orgry	Slak						
		· · · · · · · · · · · · · · · · · · ·							
							-		
7									
7 CONTRA	ACTOR'S C	R LANDOWNE	P'S CERTIFICA	IION: This water well	was (1) constr	ucted (2) recons	tructed, or (3) plugged	under my jurisdiction a	nd was
completed o			R'S CERTIFICA	IION: This water well	was (1) constr	ucted) (2) recons	tructed, or (3) plugged d is true to the best of m	under my jurisdiction a ly knowledge and belief.	nd was Kansas
completed o	Contractor's	Licence No	R'S CERTIFICA 704	IION: This water well	was (1) constr	was completed of	on (mo/day/yr)3	under my jurisdiction a ly knowledge and belief.	nd was Kansas
completed o Water Well (under the bu	Contractor's usiness nam	e of	704 axs	This Wat	er Well Record	was completed of by (sig	n (mo/day/yr)3 nature)	44-03	
completed o Water Well (under the bu	Contractor's usiness nam	e of writer or ball point pe	704 axx en. <u>PLEASE PRESS F</u>	This Wat	er Well Record	was completed of by (signeral derline or circle the cor	on (mo/day/vr) nature)	under my jurisdiction a ly knowledge and belief.	Health