

County: Greenwood Fraction: SW, NW, NW, NW Sec. 20 T. 26 S R. 10 E

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

Owner: Jay Brown Household Well

If location corrected, was listed as:

Location changed to:

Section-Township-Range: \_\_\_\_\_

Fraction (¼ calls): SW, SW, NW, NW

SW, NW, NW, NW

Other changes: Initial statements: \_\_\_\_\_

Changed to: \_\_\_\_\_

Comments: \_\_\_\_\_

Verification method: Confirmed location with Travis Euler and used Google Earth and STR Finder.

Initials: BA Date: 09/06/2022

Submitted by: ☐ Kansas Geological Survey, Data Resources Library, 1930 Constant Ave., Lawrence, KS 66047-3724  
☒ Kansas Dept. of Health & Environment, Bureau of Water, 1000 SW Jackson, Suite 420, Topeka, KS 66612-1367

<b>1 LOCATION OF WATER WELL:</b> County: <u>Greenwood</u>		Fraction <u>SW 1/4 SW 1/4 NW 1/4 NW 1/4</u>	Section Number <u>20</u>	Township Number <u>26 T</u> ( <u>S</u> )	Range Number <u>R 10</u> <input checked="" type="checkbox"/> E <input type="checkbox"/> W									
<b>2 WELL OWNER:</b> Last Name: <u>Brown</u> First: <u>Jay</u> Business: Address: <u>1192 LRD</u> City: <u>Everka</u> State: <u>KS</u> ZIP: <u>67045</u>		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: <input checked="" type="checkbox"/> <u>1192 LRD Everka KS 67045</u>												
<b>3 LOCATE WELL WITH "X" IN SECTION BOX:</b> N <table border="1" style="width:100px; height:100px; text-align: center; margin: 10px auto;"> <tr><td></td><td></td><td></td></tr> <tr><td>NW</td><td>X</td><td>NE</td></tr> <tr><td>SW</td><td></td><td>SE</td></tr> </table> W E S 1 mile					NW	X	NE	SW		SE	<b>4 DEPTH OF COMPLETED WELL:</b> <u>100</u> ft. Depth(s) Groundwater Encountered: 1) ..... ft. 2) ..... ft. 3) ..... ft., or 4) <input type="checkbox"/> Dry Well WELL'S STATIC WATER LEVEL: <u>20</u> ft. <input checked="" type="checkbox"/> below land surface, measured on (mo-day-yr) ..... <input type="checkbox"/> above land surface, measured on (mo-day-yr) ..... Pump test data: Well water was ..... ft. after ..... hours pumping ..... gpm Well water was ..... ft. after ..... hours pumping ..... gpm Estimated Yield: <u>0</u> gpm Bore Hole Diameter: <u>8</u> in. to <u>100</u> ft. and ..... in. to ..... ft.		<b>5 Latitude:</b> <u>37.77981</u> ..... (decimal degrees) <b>Longitude:</b> <u>-96.34291</u> ..... (decimal degrees) <b>Horizontal Datum:</b> <input checked="" type="checkbox"/> WGS 84 <input type="checkbox"/> NAD 83 <input type="checkbox"/> NAD 27 <b>Source for Latitude/Longitude:</b> <input type="checkbox"/> GPS (unit make/model: .....) (WAAS enabled? <input type="checkbox"/> Yes <input type="checkbox"/> No) <input type="checkbox"/> Land Survey <input type="checkbox"/> Topographic Map <input type="checkbox"/> Online Mapper: .....	
NW	X	NE												
SW		SE												
<b>6 Elevation:</b> ..... ft. <input type="checkbox"/> Ground Level <input type="checkbox"/> TOC <b>Source:</b> <input type="checkbox"/> Land Survey <input type="checkbox"/> GPS <input type="checkbox"/> Topographic Map <input type="checkbox"/> Other .....														
<b>7 WELL WATER TO BE USED AS:</b>														
1. Domestic: <input checked="" type="checkbox"/> Household <input 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): .....														
Was a chemical/bacteriological sample submitted to KDHE? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, date sample was submitted: .....														
Water well disinfected? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No														
<b>8 TYPE OF CASING USED:</b> <input type="checkbox"/> Steel <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Other ..... <b>CASING JOINTS:</b> <input checked="" type="checkbox"/> Glued <input type="checkbox"/> Clamped <input type="checkbox"/> Welded <input type="checkbox"/> Threaded Casing diameter <u>5</u> in. to <u>100</u> ft., Diameter ..... in. to ..... ft., Diameter ..... in. to ..... ft. Casing height above land surface <u>18</u> in. Weight ..... lbs./ft. Wall thickness or gauge No. <u>SPR-2-1</u>														
<b>TYPE OF SCREEN OR PERFORATION MATERIAL:</b> <input type="checkbox"/> Steel <input type="checkbox"/> Stainless Steel <input type="checkbox"/> Fiberglass <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Brass <input type="checkbox"/> Galvanized Steel <input type="checkbox"/> Concrete tile <input type="checkbox"/> None used (open hole) <input type="checkbox"/> Other (Specify) .....														
<b>SCREEN OR PERFORATION OPENINGS ARE:</b> <input type="checkbox"/> Continuous Slot <input checked="" type="checkbox"/> Mill Slot <input type="checkbox"/> Gauze Wrapped <input type="checkbox"/> Torch Cut <input type="checkbox"/> Drilled Holes <input type="checkbox"/> Other (Specify) ..... <input type="checkbox"/> Louvered Shutter <input type="checkbox"/> Key Punched <input type="checkbox"/> Wire Wrapped <input type="checkbox"/> Saw Cut <input type="checkbox"/> None (Open Hole)														
<b>SCREEN-PERFORATED INTERVALS:</b> From <u>20</u> ft. to <u>100</u> ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft. <b>GRAVEL PACK INTERVALS:</b> From <u>100</u> ft. to <u>20</u> ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.														
<b>9 GROUT MATERIAL:</b> <input type="checkbox"/> Neat cement <input type="checkbox"/> Cement grout <input checked="" type="checkbox"/> Bentonite <input type="checkbox"/> Other ..... Grout Intervals: From <u>20</u> ft. to <u>Surface</u> ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.														
<b>Nearest source of possible contamination:</b> <input type="checkbox"/> Septic Tank <input type="checkbox"/> Lateral Lines <input type="checkbox"/> Pit Privy <input type="checkbox"/> Livestock Pens <input type="checkbox"/> Insecticide Storage <input type="checkbox"/> Sewer Lines <input type="checkbox"/> Cess Pool <input checked="" type="checkbox"/> Sewage Lagoon <input type="checkbox"/> Fuel Storage <input type="checkbox"/> Abandoned Water Well <input type="checkbox"/> Watertight Sewer Lines <input type="checkbox"/> Seepage Pit <input type="checkbox"/> Feedyard <input type="checkbox"/> Fertilizer Storage <input type="checkbox"/> Oil Well/Gas Well <input type="checkbox"/> Other (Specify) .....														
Direction from well? <u>South</u> Distance from well? <u>300 ft</u>														
<b>10 FROM TO LITHOLOGIC LOG</b>		<b>FROM TO LITHO. LOG (cont.) or PLUGGING INTERVALS</b>												
0	12	Shale												
12	25	limestone												
25	32	Shale												
32	40	limestone												
40	65	shale												
65	71	limestone												
71	100	Shale												
		Notes: well is low producing 1/4 gpm or less												
<b>11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:</b> This water well was <input checked="" type="checkbox"/> constructed, <input type="checkbox"/> reconstructed, or <input type="checkbox"/> plugged under my jurisdiction and was completed on (mo-day-year) <u>3/8/22</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>975</u> This Water Well Record was completed on (mo-day-year) <u>3/8/22</u> under the business name of <u>Everka Water Well Drilling</u> Signature: <u>[Signature]</u>														
Mail 1 white copy along with a fee of \$5.00 for each constructed well to: Kansas Department of Health and Environment, Bureau of Water, GWTS Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Mail one to Water Well Owner and retain one for your records. Telephone 785-296-5524. Visit us at <a href="http://www.kdheks.gov/waterwell/index.html">http://www.kdheks.gov/waterwell/index.html</a> KSA 82a-1212 Revised 7/10/2015														