	(to rectify lacking	g or incorrect information)	County: <u>Sedgwic</u>	ĥ
Location listed as:	:	Location	changed to:	K
Section-Township-Range: 6	-1-1		- 27 S - 1E SE SW	
Fraction (¼ ¼ ¼):		SE	SE SW	
Other changes: Initial statements:				
Changed to:				
Comments:				
verification method: Location			on wichita	Cety
map.			_	, ,
			initials: <u>EP.</u> date:	8/17/2005

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

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.

4 ILOGATIO	NI OF WATER	NACT L	C					in Niverbar	Taural	·	Den	a Alumba	
	N OF WATER		Fraction		SE ½	. CIA/		ion Number 06		nip Number	1	ge Number	
County:	Sedg	nearest town						00	<u>T</u> (01 s	R	01	EW
	265 N. Amic		or city stre	et addr	ess or well i	i located w	unin city?						
			T-4-LD	-4		LICA In							
2 WATER V	WELL OWNER				hemical	USA, In	G.						
	fress, Box#	•	15710 J						Board of	Agriculture, Div	ision of Wa	ater Resou	ırces
City, State, Z	IP Code		<u> Housto</u>	n, TX	77067				Application	on Number:			
LÖCATE	WELL'S LOC		4 DEPTH				0.5				,		
AN "X" IN	SECTION BO	//· _			MPLETED								
. ↑			Depth(s) G	roundwa	ater Encour	ntered 1		fi	t. 2	ft.	3		office
										ured on mo/day			ස
		NE								hours			opm C
W W		i E											
∑ W —			St. Tield		gpm:	vveli water	was	¹	it. aiter	hours	pumping		gpiii C
1			Bore Hole	Diamete	er 0.0	in. to	Z ;)	ft. and	nditioning tering	n. to		ft.
	-sw	SE	1 Dor	nestic	3 Feed in	AS: 5 PL	iblic water si	uppiy	8 Air co	nationing terina	12 Other (n well Specify hel	10w) -
1											iz Oulei (opecity be	, , , , , , , , , , , , , , , , , , ,
Y L	<u> </u>	ا ليسند								toring well			
	S	\	Vas a che	mical/ba	acteriologica	al sample s	ubmitted to I	Department?	Yes	No X If yes	s, mo/day/y	r sample v	was
		s	ubmitted					Wa	ater Well Disir	nfected? Yes		No X	
5 TYPE OF	BLANK CAS				5 Wrough	t Iron	8 Concr	ete tile		JOINTS: Glue			
			5)		-							Clamped	
1 Ste		3 RMP (S	K)		b Asbesto	os-Cement	9 Other	(specify belo	ow)	Wel		<u> </u>	
2 PV	<u> </u>	4 ABS			7 Fibergla	ass				Thre	eaded	Flush	
Blank casino	diameter	2	in. to	15	ft., Dia	1	in. 1	to	ft., Dia		in. to		ft.
Casing beigl	ht above land	surface Flu	ıshmou	int in	weight	(.703	lhe /ft	Wall thickne	ss or gauge No		Sch. 40	
TYPE OF S	CDEEN OD DE	ERFORATION	MATERIA	····· "	, weight		·····	DVC		Asbestos-cem			
1 Stee					5 Fibergla	ass	8	RMP (SR)	11	Other (specify None used (or) <u>-</u>		-
2 Bra		4 Galvani			6 Concre	te tile	, 9	ABS					
[ION OPENING					d wrapped			ıt	11 None	e (open no	ne)
1 Cor	ntinuous slot	3 N	fill slot			6 Wire v	vrapped		9 Drilled				
2 Lou	vered shutter	4 K	ey punche	ed		7 Torch	cut		10 Other	(specify)			
SCREEN-PE	ERFORATED	INTERVALS:	From	1	15 f	t. to	25			ft.			
										ft.			
	AVEL DACK IN	ITEDVALO.	F		13	4 4-	25		From		to		" ス
GRA	AVEL PACK IN	TERVALS:								ft.			
					f	t. to		ft.	From	ft.	to		ft.
6 GROUT	MATERIAL:	1 Neat ce	ement	2 (Cement gro	ut	3 Ber	ntonite	4 Other				
Grout Interv	als From	2 f	t. to	13	ft. From		ft.	to	ft. F	rom	ft. to		ft.
		e of possible co							stock pens		bandoned		
	ptic tank		4 Lateral		7	Pit privy		3	storage		il well/ Gas		
•	wer lines		5 Cess p			Sewage			ilizer storage		ther (speci		
						•	•		•		ulei (speci	ily below)	
1	tertight sewer	lines	6 Seepa	ge pit	٤	9 Feedyar	a ,		cticide storag	e			
Direction fro								How man	y feet?				
FROM	ТО	CODE		THOLC	OGIC LOG		FROM	то		PLUGGING	INTERVAL	_S	
0	1		hait						-				
1	12	Cla											
12	15.5	Silt											
15.5	25	Sar	nd .										
								-				1	
7 CONTR	ACTOR'S OF		'S CEPTI	FICATIO	N. This yes	ter well un	e (1) coneta	icted (2) rec	constructed o	r (3) plugged un	der my juri	sdiction an	nd was
-			O OERTI						-			- 1/	
1	on (mo/day/yr)			5-3-						est of my know			
Water Well	Contractor's L	icense No			531		This	Water Well [ompleted on (m	io(daylyr)	//1-8-	U5
under the b	usiness name	of C	Seotech	nical	Service	s, Inc.	by (s	ignature) /		Kon	WAS !	112	
INSTR	UCTIONS: Ple	ease fill in blanks	and circle	the corre	ect answers.	Send three	copies to Kar	sas Departre	ent of Health a	nd Environment,	Bureau of V	Vater, 1000	SW
Jackso	on St., Ste. 420,	Topeka, Kansas	s 66612-13	67. Tele	phone: 913-	296-5545.	Send one to V	VATER WELL	OWNER and	retain one for yo	ur records.		