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

(to rectify lacking or incorrect information)

Location listed as:	Location changed to:
Section-Township-Range: 16-175-1E	16-275-1E NW NE NW
Fraction (1/4 1/4 1/4): NW NE NW	NW NE NW
Other changes: Initial statements:	
Changed to:	
Comments:	
verification method: Well address, city.	street map, and mapping
submitted by: Kansas Geological Survey Data Resources Library 1930 Co	initials: DRL date: 5/21/2007

to: Kansas Dept of Health & Environment, Bureau of Water, 1000 SW Jackson, Suite 420, Topeka, KS 66612-1367.

WATE	D WELL	DECOI	2D		Form WW	C-5	1w - 4B	n of Wote	r Resources; App. No.		
WATER WELL REC 1 LOCATION OF WA				.•	Erection				Township Number	Range Number	
	lawich		••	NW1/4 NE 1/4	1/W1/4	16		T /7 S R /			
Dista	nce and dire	ction fron	n nearest	town or ci	ity street address of	well if			Systems (decimal deg		
locat	ed within cit	<u>y?</u>	HC+	116	14. he		Latitude:				
located within city? 13th St. Wichtalks							Longitud	e:			
2 WATER WELL OWNER: Cargl II RR#, St. Address, Box # : 715 E. 13 m Str							Elevation:				
RR#, St. Address, Box # : 715 E.13 th Str							Datum:				
City, State, ZIP Code : Wichta, KS 67214 3 LOCATE WELL'S 4 DEPTH OF COMPLETED WELL							Data Collection Method:				
3 LOC	ATE WEL	L'S 4 I)EPTH	OF COM	PLETED WELL.	77		ft.			
	CATION					11					
	H AN "X" I	IN De	oth(s) Gr	oundwater	Encountered (1)2	ft.	(2)	measured on mo/day/	ft.	
SEC	TION BOX	: WI	ELL'S ST	FATIC WA	ATER LEVEL	1. 7 ft.	below land	d surface	measured on mo/day/	yr. 4-13-07	
	N	_ _	Pump test data: Well water was								
	X	Es									
	V NE	4 7	LLL WA	TEK TO B	SE USED AS: 5 Pt	iblic water	suppiy	8 Air (ratering 11 Injection	ction well	
w		$\begin{bmatrix} E & 1 & 1 \\ 2 & 1 \end{bmatrix}$	reigntion	3 Fee	Sulot 6 Oll III	etio (loven	ippiy & gordon) 4	9 Dew	itoring well	ier (Specify below)	
			mganon	. 4 1110	iustriai / Doine	Suc (lawii c	& garden)	Mon	ntoring wen		
SV	V SE	l wa	s a chem	ical/bacter	riological sample su	hmitted to	Denartment	t? Yes	No 🔏;	If ves. mo/day/vrs	
		Sar	nnle was	submitted	- Sumple su	Wate	er well disir	ifected?	Yes No		
	S		apro						210 111		
5 TVDI	E OF CASIN	NC USET	. 5	Wrought	Iron & Co	norete tile		CASING	G IOINTS: Glued	Clamped	
1	Steel 3	RMP (SI). 2)	Wiougiii Ashestos	-Cement 9 Otl	ner (specify	helow)	CASING	G JOINTS: Glued Welded	Clamped	
	\	ABS	,	Fiberglas:	s	ici (specify	ociowy		Threaded		
Blank ca	asing diamet		in. t	0	ft Diameter		in. to	ft	Diameter	in. toft.	
Casing 1	neight above	land surfa	ace	lush	in., Weight		lbs./ft.	Wall thic	kness or guage No.	Seh. 40	
TYPE C	F SCREEN	OR PERI	FORATIO	ON MATE	ERIAL:						
1	Steel 3	3 Stainless	Steel	5 Fiber	rglass E VC	9 A	ABS		11 Other (Specify) .		
						SR) 10	Asbestos-C	ement	12 None used (open	hole)	
	N OR PERF										
1	Continuous	slot (3)	Mill slot	5 (auzed wrapped	Torch cut	9 Drille	ed holes	11 None (open he	ole)	
2	Louvered sh	utter 4 h	Cey punc	ched 6 W	vire wrapped	Saw Cut	10 Othe	r (specif	y) ft. to	A	
SCREE	N-PERFORA	ALED IN	IEKVAL	LS: From.	π. ۱۲. ۱۲. ۱۲. ۱۲. ۱۲. ۱۲. ۱۲. ۱۲. ۱۲. ۱۲)(. <i>F</i>	II.,	From		. It.	
	GRAVEI P	ACK INIT	TERVAI	S. From	22 ft to	10		From			
	OKAVLLI	ACKIN	LICYAL	From	ft to	······································	ft	From		fi	
								1 10111			
6 GRO	UT MATEI	RIAL:	1 Neat ce	ement 2	Cement grout	Bentonite	4 Other				
Grout In							ft. to	ft	., From	ft. toft.	
	the nearest s	ource of p					_				
	Septic tank				7 Pit privy	10 Livest	_			16 Other (specify	
	Sewer lines			s pool	8 Sewage lagoon 9 Feedyard	11 Fuel st			andoned water well	below)	
	Watertight so			epage pit			zer Storage		l well/gas well		
FROM	TO			HOLOGIC		FROM			PLUGGING INTI	FRVAIS	
	14	59/40		HOLOGIC	LOG	TROW	10		TEOGORIO IIVII	JR V / LLD	
9	u .	Sand		o Mediur	n amia						
	-		, , , , , , , , , , , , , , , , , , ,	o reconsi	710411						
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								_			
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged											
under my jurisdiction and was completed on (mo/day/year)											
Kansas Water Well Contractor's License No											
under th	e business na	ame of	sclow	6pm	CE PARCE HIDAY				, underline circle the co	reat angivers Cand t	
three copie	es to Kansas De	epartment of	Health an	d Environme	nt, Bureau of Water, Ge	ology Section	ity. Ficase fil i, 1000 SW Jac	ckson St S	suite 420, Topeka, Kansas	66612-1367. Telephone	
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/index.html.