

County: Neosho Fraction SE NW NE Sec. 30 T 27 S R 18 EW

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

(to rectify lacking or incorrect information)

Owner: Monty John

Location was listed as:

Location changed to:

Section-Township-Range: 6-28 S-17 E

30-27 S-18 E

Fraction (1/4 1/4 1/4): SE SE SE

SE NW NE

Other changes: Initial statements: _____

Changed to: _____

Comments: _____

Verification method: Well owner's address, written description,
Neosho County online parcel search, and mapping tool on
KGS website. initials: ARJ date: 7/9/2013

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.

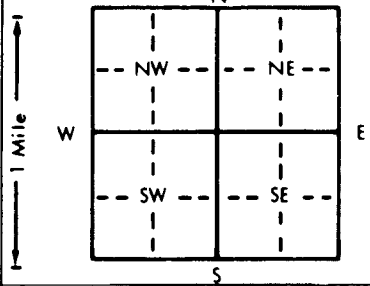
1 LOCATION OF WATER WELL: Fraction SE 1/4 SE 1/4 SE 1/4 Section Number 6 Township Number T 28 S Range Number R 17 EW
 County: Neosho

Distance and direction from nearest town or city street address of well if located within city?
Chanute 1/4 mile

2 WATER WELL OWNER: Monty John
 RR#, St. Address, Box #: 920 Dawn Lane Board of Agriculture, Division of Water Resources
 City, State, ZIP Code: Chanute KS 66720 Application Number:

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:

4 DEPTH OF COMPLETED WELL: 80' ft. ELEVATION:



Depth(s) Groundwater Encountered 1. 22' ft. 2. 35' ft. 3. _____ ft.
 WELL'S STATIC WATER LEVEL _____ ft. below land surface measured on mo/day/yr
 Pump test data: Well water was N/A ft. after N/A hours pumping _____ gpm
 Est. Yield _____ gpm Well water was N/A ft. after N/A hours pumping _____ gpm
 Bore Hole Diameter 9" in. to 80' ft., and N/A in. to _____ ft.
 WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well
 1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)
 2 Irrigation 4 Industrial 7 Lawn and garden only 10 Monitoring well
 Was a chemical/bacteriological sample submitted to Department? Yes _____ No If yes, mo/day/yr sample was submitted _____
 Water Well Disinfected? Yes No

5 TYPE OF BLANK CASING USED: 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued _____ Clamped _____
 2 PVC 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded _____
 1 Steel 4 ABS 7 Fiberglass Threaded _____

Blank casing diameter 6" in. to _____ ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.
 Casing height above land surface 12" in., weight _____ lbs./ft. Wall thickness or gauge No. SCH 40

TYPE OF SCREEN OR PERFORATION MATERIAL: 7 PVC 10 Asbestos-cement
 1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 11 Other (specify) _____
 2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 12 None used (open hole)

SCREEN OR PERFORATION OPENINGS ARE: 5 Gauzed wrapped 8 Saw cut 11 None (open hole)
 1 Continuous slot 3 Mill slot 6 Wire wrapped 9 Drilled holes
 2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify) _____

SCREEN-PERFORATED INTERVALS: From 23' ft. to 62' ft., From _____ ft. to _____ ft.
 From _____ ft. to _____ ft., From _____ ft. to _____ ft.

GRAVEL PACK INTERVALS: From 22' ft. to 80' ft., From _____ ft. to _____ ft.
 From _____ ft. to _____ ft., From _____ ft. to _____ ft.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other _____
 Grout intervals: From 0 ft. to 20' ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.

What is the nearest source of possible contamination: 10 Livestock pens 14 Abandoned water well
 1 Septic tank 4 Lateral lines 7 Pit privy 11 Fuel storage 15 Oil well/Gas well
 2 Sewer lines 5 Cess pool 8 Sewage lagoon 12 Fertilizer storage 16 Other (specify below)
 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 13 Insecticide storage

Direction from well? How many feet? 200'

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	10	Soil - Clay			
10	20'	Lime			
20'	40'	Shale			
40'	80'	Lime			

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	10	Soil - Clay			
10	20'	Lime			
20'	40'	Shale			
40'	80'	Lime			

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) 4/5/99 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 591 This Water Well Record was completed on (mo/day/yr) 4/15/99 under the business name of R-Well Well Service Inc. by (signature) [Signature]

INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks, underline or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Bureau of Water, Topeka, Kansas 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.

OFFICE USE ONLY
T
R
EW
SEC.
1/4
1/4
1/4