CORRECTION(S) TO WATER WELL RECORD (WWC-5) (to rectify lacking or incorrect information)										
County: <u>Sedawick</u> Location changed to:										
2-275-2E										
2-275-2E SW NE SE										

verification method: Well address, city street map, and

Andover 1:24,000 topo. map.

initials: DRA date: 3/31/2006

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.

	ER WELL					Form WWC	C-5				Resources; App. No.			
					action		Se	ection Nur		Township Number	Range Number			
Co	County: Sedawick Distance and direction from nearest town or city stre					1/4 1/4	1/4				T S	R	E/W	
							vell if				Systems (decimal de			
loc	ated within cit	ty? Q	374 (Yastle	e Rock	۷.		Latitude: VW,37,737802 5€37,723048						
							Longitude NW, 9719968 5E 97,17125							
Z W	2 WATER WELL OWNER: Mindy Hsing RR#, St. Address, Box # : 2374 Castle Rock								Elevation:					
	ty, St. Addres		<i>-</i>	3,74	Castly	e kock		ı	atum:					
		WICHIA IS							Data Collection Method:					
	CATE WEL	L'S	4 DEPTH OF COMPLETED WELL X.O. ft.											
	OCATION	TN.	Develop Community of (1) 31 (2) (2)											
	ITH AN "X"	in	Depth(s) Groundwater Encountered (1)31											
SE	CTION BOX	·:	WELL'S STATIC WATER LEVEL											
	1 1 1	Pump test data: Well water was												
	' '	WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well											· spin	
w	NW NE	- 1 1	1 Domes		Feedlot							her (Specify	below)	
"	+ + + + +	E 1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below) 2 Irrigation 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well												
	SW SE		C											
1	SW SE	1 1	Was a ch	emical/b	acteriolog	gical sample sub	mitted to	De	partment?	Yes	; No . X ;	If yes, mo/d	ay/yrs	
		_	Sample v	vas subn	nitted		Wat	er v	well disinf	fected?	Yes . X No	••••		
	S													
5 TY	PE OF CASI	NG US	SED:	5 Wro	ught Iron	8 Cor	crete tile		(CASING	JOINTS: Glued	Clamped	1	
	1 Steel 3	3 RMP		6 Asb	estos-Cen	nent 9 Oth	er (specif	y be	elow)		Welded			
\mathcal{C}		4 ABS		7 Fibe	rglass						Threaded	1		
Blank	casing diamet	ter	5 iı	1. to	8 ()	ft., Diameter		in.	to	ft., l	Diameter	in. to	ft.	
Casing height above land surface in., weightlbs./ft. Wall thickness or guage No														
TYPE OF SCREEN OR PERFORATION MATERIAL:														
1 Steel 3 Stainless Steel 5 Fiberglass 7 PVC 9 ABS 11 Other (Specify)														
2 Brass 4 Galvanized Steal 6 Concrete tile 8 RM (SR) 10 Asbestos-Cement 12 None used (open hole)														
SCREEN OR PERFORATION OPENINGS ARE: 1 Continuous slot 3 Mill slot 5. Guazed wrapped 7 Torch cut 9 Drilled holes 11 None (open hole)														
1 Continuous slot 3 Mill slot 5. Guazed wrapped 7 Torch cut 9 Drilled holes 11 None (open hole) 2 Louvered shutter 4 Key punched 6 Wire wrapped 8 Saw Cut 10 Other (specify)														
2 Louvered shutter 4 Key punched 6 Wire wrapped 8 Saw Cut 10 Other (specify)														
From														
GRAVEL PACK INTERVALS: From Q.4														
From ft. to ft., From ft. to ft.														
				t cement	t 2 Cem	ent grout 3 B	entonite	7 4	Other					
	Intervals:	Fron				ft., From	• • • • • • • • • • • • • • • • • • • •	. It.	to	ft.	, From	ft. to	tt.	
What	is the nearest		•			4	10 T :	41	1	12 I		16 Oth an (as	: . .	
	1 Septic tank 2 Sewer lines			Cess poo	ines 7 Pi	ewage lagoon	10 Lives				ecticide Storage andoned water well	16 Other (sp below)	becity	
(3 Watertight			Seepage		ewage lagoon eedvard			age Storage		wll/gas well	oelow)		
Direc	tion from well		_	Seepage Sas	<i>]</i> 1	couyard			feet?		wingas well			
FROI					OGIC LO	G	FROM		TO		PLUGGING INT	ERVALS		
$\overline{\alpha}$	a a	To					11.01	-						
ă	ーラー	-0						\dashv						
ă 7	31	<u> </u>	rean	Sha	10									
31	37	R		hale										
37	68	\rightarrow	Tue 3	Shale										
68			mes	ton										
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (Constructed) (2) reconstructed, or (3) plugged													plugged	
under my jurisdiction and was completed on (mo/day/year) 12. 3.: 25. and this record is true to the best of my knowledge and belief.														
Kansas Water Well Contractor's License No. 2!! This Water Well Record was completed on (mo/day/year) . 12:30.05														
Under the business name of Chase Orilling by (signature) D. Chase														
INSTRUCTIONS: Use typewriter or ball point pen. <u>PLEASE PRESS NRMLY</u> and <u>PRINT</u> 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, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-												d top three		
						of Water, Geology S or your records. Fee					0, Topeka, Kansas 66612	-1367. Telepho	ne 785-	
-/0-00	0110 0110 10		0 11	and	WILL OHO II	records. I'cl	- J. 45.00 IC	_ ~~		, 611.				