

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

(to rectify lacking or incorrect information)

County: Butler

Location listed as:

Section-Township-Range: 6 - 20 S - 3 E

Fraction ($\frac{1}{4}$ $\frac{1}{4}$ $\frac{1}{4}$): SE SW SW

Location changed to:

31 - 27 S - 3 E

SW SW SE

Other changes: Initial statements: _____

Changed to: _____

Comments: _____

verification method: Well address, area road map, and mapping tool & aerial photo on KGS website.

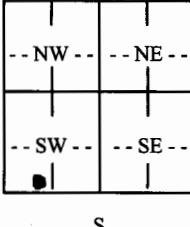
initials: DRB date: 10/16/2008

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.

WATER WELL RECORD

Form WWC-5

Division of Water Resources; App. No.

1 LOCATION OF WATER WELL: County: <u>Butler</u>		Fraction <u>SE 1/4 SW 1/4 SW 1/4</u>	Section Number <u>6</u>	Township Number <u>T 20 S</u>	Range Number <u>R 3 E</u>	
Distance and direction from nearest town or city street address of well if located within city? <u>at owner's address</u> <u>(DRL, per driller)</u>		Global Positioning Systems (decimal degrees, min. of 4 digits)				
2 WATER WELL OWNER: <u>Stovall construction</u> RR#, St. Address, Box # <u>720 Verona</u> City, State, ZIP Code <u>Andover KS 67002</u>		Latitude: _____ Longitude: _____ Elevation: _____ Datum: _____ Data Collection Method: _____				
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: 		4 DEPTH OF COMPLETED WELL <u>101</u> ft.				
		Depth(s) Groundwater Encountered (1) <u>85</u> ft. (2) ft. (3) ft. WELL'S STATIC WATER LEVEL <u>21</u> ft. below land surface measured on mo/day/yr..... Pump test data: Well water was ft. after hours pumping gpm Est. Yield <u>30</u> gpm: Well water was ft. after hours pumping gpm 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 <input checked="" type="checkbox"/> Domestic (lawn & garden) 10 Monitoring well				
		Was a chemical/bacteriological sample submitted to Department? Yes <input checked="" type="checkbox"/> No; If yes, mo/day/yr Sample was submitted Water well disinfected? Yes No				
5 TYPE OF CASING USED:		5 Wrought Iron 1 Steel <input checked="" type="checkbox"/> PVC	6 Asbestos-Cement 3 RMP (SR) 4 ABS	7 Fiberglass 8 Concrete tile 9 Other (specify below)	CASING JOINTS: Glued..... Clamped..... Welded..... Threaded.....	
Blank casing diameter <u>5</u> in. to <u>81</u> ft., Diameter in. to ft., Diameter in. to ft.						
Casing height above land surface <u>12</u> in., Weight <u>160</u> lbs./ft.		Wall thickness or guage No.				
TYPE OF SCREEN OR PERFORATION MATERIAL:						
1 Steel 3 Stainless Steel 5 Fiberglass <input checked="" type="checkbox"/> PVC 9 ABS 11 Other (Specify) 2 Brass 4 Galvanized Steel 6 Concrete tile 8 RM (SR) 10 Asbestos-Cement 12 None used (open hole)						
SCREEN OR PERFORATION OPENINGS ARE:						
1 Continuous slot <input checked="" type="checkbox"/> Mill slot 5 Gauzed 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)						
SCREEN-PERFORATED INTERVALS: From <u>81</u> ft. to <u>101</u> ft., From ft. to ft. From ft. to ft., From ft. to ft.						
GRAVEL PACK INTERVALS: From <u>20</u> ft. to <u>101</u> ft., From ft. to ft. From ft. to ft., From ft. to ft.						
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout <input checked="" type="checkbox"/> Bentonite 4 Other						
Grout Intervals: From <u>2</u> ft. to <u>20</u> ft., From ft. to ft., From ft. to ft.						
What is the nearest source of possible contamination:						
1 Septic tank 4 Lateral lines 7 Pit privy 10 Livestock pens 13 Insecticide Storage 16 Other (specify) 2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 14 Abandoned water well below) <input checked="" type="checkbox"/> Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer Storage 15 Oil well/gas well						
Direction from well? How many feet?						
FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS	
0	4	earth				
4	15	red clay				
15	48	yellow clay				
48	50	green shale				
50	65	red bed				
65	80	shaly lime				
80	101	sandy lime				
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was <input checked="" type="checkbox"/> constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) <u>6/18/08</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>4943</u> This Water Well Record was completed on (mo/day/year) <u>9/4/08</u> under the business name of <u>Resource Well Drilling</u> by (signature) <u>George Resor</u>						
INSTRUCTIONS: Use typewriter or ball point pen. <u>PLEASE PRESS FIRMLY</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 785-296-5522. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each <u>constructed</u> well. Visit us at http://www.kdheks.gov/waterwell/index.html						