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

(to rectify lacking or incorrect information)

Location listed as:	County: <u>Weosho</u> Location changed to:
Section-Township-Range: /- 28 5 - /7 E	1-285-17 E
Fraction ( 1/4 1/4 1/4): None Given	NE NE NE
Other changes: Initial statements:	
Changed to:	
Comments:	
verification method: Well address, area re	ead map, legal description,
verification method: Well address, area re position on plat map, and ma	pping tool & acrial photos
on KGS website	initials: 6-18 date:

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.

Datance and direction from nearest town or city street address of well of the property of the	VATER WELL RECORD	Form WWC-5		Water Resources; App. No.		
Distance and direction from nearest town or city street address of well if contend within city?   3451 South Cundry Club Rand   Latitude		1	I .			
Content with city?   Stafe Service Wanger   Club Red   Longitude:	County: NEOSHO		/4			
WATER WELL OWNER: Dav 10 Waccount RR#, St. Address, Box # : 2615 1907 Road   Elevation: Datum: Data Collection Method:  1. OCATE WELL'S (CHANUTE, K. 2. 66720)			T	•		
RR#, St. Address, Box # 26/5 907/ KeAD  City, State, ZIP Code : CHANUTE, K. 16/720  DOCATE WELL'S   DOCATE WELL'S   DOCATION WILL   DOCATE WELL'S   DOCATE WELL'S   DOCATE WELL'S   DOCATON WITH AN "K" IN SECTION BOX:  NUTH AN "K" IN SECTION BOX:  WELL'S STATIC WATER LEVEL			Longitude:			
Datum:  City, State, 21P Code  CHANDTE, K's. 66720  Data Collection Method:  BLOCATION  WITH AN "X" IN  SECTION BOX:  WELL'S STATIC WATER LEVEL.  The blow land surface measured on moday/yr.  Pump last data: Well water was.  The filter.  Nour Spumping.  SECTION BOX:  WELL WATER TO BE USED AS: 5 Public water supply  SA for conditioning 11 Injection well water was.  STYPE OF CASING USED:  SWILL WATER TO BE USED AS: 5 Public water supply  Was a chemical/bacteriological sample submitted to Department? Yes.  No.  STYPE OF CASING USED:  SWILL WATER TO BE USED AS: 5 Public water supply  Was a chemical/bacteriological sample submitted to Department? Yes.  No.  STYPE OF CASING USED:  SWILL WATER TO BE USED AS: 5 Public water supply  Was a chemical/bacteriological sample submitted to Department? Yes.  No.  STYPE OF CASING USED:  SWILL WATER TO BE USED AS: 5 Public water supply  Was a chemical/bacteriological sample submitted to Department? Yes.  No.  STYPE OF CASING USED:  SWILL WATER TO BE USED AS: 5 Public water supply  Was a chemical/bacteriological sample submitted to Department? Yes.  No.  STYPE OF CASING USED:  SWILL WATER TO BE USED AS: 5 Public water supply  Was a chemical/bacteriological sample submitted to Department? Yes.  No.  STYPE OF CASING USED:  SWILL WATER TO BE USED AS: 5 Public water supply  Was a chemical/bacteriological sample submitted to Department? Yes.  No.  STYPE OF CASING USED:  SWILL WATER TO BE USED AS: 5 Public water supply  Was a chemical/bacteriological sample submitted to Department? Yes.  No.  STYPE OF CASING USED:  SWILL WATER TO BE USED AS: 5 Public water supply  Water well disinfected? Yes.  No.  STYPE OF CASING USED:  SWILL WATER TO BE USED AS: 5 Public water supply  Water well disinfected? Yes.  No.  STYPE OF CASING USED:  SWILL WATER TO BE USED AS: 5 Public water supply  B CASING USED:  Throw Mater well was (Department? Yes.  No.  STYPE OF CASING USED:	WATER WELL OWNER: DAY D	VAGGONER	Elevation:	Elevation:		
DOCATE WELL'S   LOCATION   Depth(s) Groundwater Encountered   Depth(s) Groundwater   Depth		TH ROAD	Datum:	Datum:		
DOCATION WITH AN "N" IN SECTION BOX:  Depth(s) Groundwater Encountered (1)	City, State, ZIP Code : CHANUTE	1 Ks. 66720		on Method:		
Pump past data: Well water was						
Pump past data: Well water was	I		* ^			
Est, Yield	DECITOR DOM:	TITEL EE TEENTON	0410 14114 041		,, , , - , , , , , , , , , , , , , , ,	
WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well was a chemical/bacteriological sample submitted to Department? Yes	N Pump test da	ita: Well water was	ft. after	hours pumping.	gpm	
Domestic   3 Feedlot   6 Oil field water supply   9 Dewatering   12 Other (Specify bel   2 Irrigation   4 Industrial   7 Domestic (lawn & garden)   10 Monitoring well   12 Was a chemical/bacteriological sample submitted to Department? Ves   No   No   If yes, mo/day/ Sample was submitted   No   Water well distinfected? Ves   No   No   No   No   No   No   No   N	THE THE TOTAL TH					
2 Irrigation 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well  Was a chemical/bacteriological sample submitted to Department? Yes	NW NE					
Was a chemical/bacteriological sample submitted to Department? Yes						
was a chemical/bacteriological sample submitted to Department? Yes	'   '	ildustriai / Domestic (i	lawii & gaideii) 10 i	Wolffforfing wen	• • • • • • • • • • • • • • • • • • • •	
S TYPE OF CASING USED: 5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued C. Clamped 1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded Threaded.  3 Isine casing diameter in. to 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		eriological sample submitt	ed to Department?	/es No;	If yes, mo/day/yrs	
TYPE OF CASING USED: 5 Wrought Iron 8 Concrete tile (ASING JOINTS: Glued)	1 -	ed	Water well disinfect	ed? Yes No		
Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below)   Welded.						
Threaded.  Ilank easing diameter in. to	TYPE OF CASING USED: 5 Wrough	at Iron 8 Concrete	e tile CAS	SING JOINTS: Glued	•	
lank casing diameter 1. in. to 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	1 Steel 3 RMP (SR) 6 Asbesto	os-Cement 9 Other (sp	pecify below)	Welded.		
YPE OF SCREEN OR PERFORATION MATERIAL:  1 Steel 3 Stainless Steel 5 Fiberglass  2 Brass 4 Galvanized Steal 6 Concrete tile 8 RM (SR) 10 Asbestos-Cement 12 None used (open hole)  CREEN OR PERFORATION OPENINGS ARE:  1 Continuous slot 3 Mil slot 5 Gauzed wrapped 7 Torch cut 9 Drilled holes 11 None (open hole)  2 Louvered shutter 4 Key punched 6 Wire wrapped 7 Torch cut 9 Drilled holes 11 None (open hole)  2 Louvered shutter 4 Key punched 6 Wire wrapped 7 Torch cut 9 Drilled holes 11 None (open hole)  2 Louvered shutter 4 Key punched 6 Wire wrapped 7 Torch cut 9 Drilled holes 11 None (open hole)  2 Louvered shutter 4 Key punched 6 Wire wrapped 7 Torch cut 9 Drilled holes 11 None (open hole)  2 Louvered shutter 4 Key punched 6 Wire wrapped 7 Torch cut 9 Drilled holes 11 None (open hole)  2 Louvered shutter 4 Key punched 6 Wire wrapped 7 Torch cut 9 Drilled holes 11 None (open hole)  2 Louvered shutter 4 Key punched 6 Wire wrapped 7 Torch cut 9 Drilled holes 11 None (open hole)  2 Louvered shutter 4 Key punched 6 Wire wrapped 7 Torch cut 9 Drilled holes 11 None (open hole)  2 Louvered shutter 4 Key punched 6 Wire wrapped 7 Torch cut 9 Drilled holes 11 None (open hole)  2 Louvered shutter 4 Key punched 6 Wire wrapped 7 Torch cut 9 Drilled holes 11 None (open hole)  3 Reverting 10 Other (specify) 10 Other (specify) 10 Other (specify) 10 Other (specify) 11 Other (specify) 11 Other (specify) 11 Other (specify) 11 Other (specify) 12 Other (specify) 13 Other (specify) 13 Other (specify) 14 Other (specify) 15 Other (spec	2 PVC 4 ABS 7 Fibergla	ASS		Threade	d	
YPE OF SCREEN OR PERFORATION MATERIAL:  1 Steel 3 Stainless Steel 5 Fiberglass  2 Brass 4 Galvanized Steal 6 Concrete tile 8 RM (SR) 10 Asbestos-Cement 12 None used (open hole)  CREEN OR PERFORATION OPENINGS ARE:  1 Continuous slot 3 Mill slot 5 Gauzed wrapped 7 Torch cut 9 Drilled holes 11 None (open hole)  2 Louvered shutter 4 Key punched 6 Wire wrapped 7 Torch cut 9 Drilled holes 11 None (open hole)  2 Louvered shutter 4 Key punched 6 Wire wrapped 7 Torch cut 9 Drilled holes 11 None (open hole)  2 Louvered shutter 4 Key punched 6 Wire wrapped 7 Torch cut 9 Drilled holes 11 None (open hole)  2 Louvered shutter 4 Key punched 6 Wire wrapped 7 Torch cut 9 Drilled holes 11 None (open hole)  2 Louvered shutter 4 Key punched 6 Wire wrapped 7 Torch cut 9 Drilled holes 11 None (open hole)  2 Louvered shutter 4 Key punched 6 Wire wrapped 7 Torch cut 9 Drilled holes 11 None (open hole)  2 Louvered shutter 4 Key punched 6 Wire wrapped 7 Torch cut 9 Drilled holes 11 None (open hole)  3 War Cut 10 Other (specify) 11 Other (specify) 12	Stank casing diameter	in Weight	in. to	. II., Diameter	in. toIt.	
1 Steel 3 Stainless Steel 5 Fiberglass PVC 9 ABS 11 Other (Specify)	ASING REIGHT ADOVE IAND SUFFACE	in., weight <b></b>	ibs./it. waii	unickness of guage No.		
2 Brass 4 Galvanized Steal 6 Concrete tile 8 RM (SR) 10 Asbestos-Cement 12 None used (open hole)  CREEN OR PERFORATION OPENINGS ARE:  1 Continuous slot 3 Mill slot 5 Gauzed wrapped 7 Torch cut 9 Drilled holes 11 None (open hole)  2 Louvered shutter 4 Key punched 6 Wire wrapped 7 Torch cut 9 Drilled holes 11 None (open hole)  2 Louvered shutter 4 Key punched 6 Wire wrapped 7 Torch cut 9 Drilled holes 11 None (open hole)  2 Louvered shutter 4 Key punched 6 Wire wrapped 7 Torch cut 9 Drilled holes 11 None (open hole)  2 Louvered shutter 4 Key punched 6 Wire wrapped 7 Torch cut 9 Drilled holes 11 None (open hole)  2 Louvered shutter 4 Key punched 6 Wire wrapped 7 Torch cut 9 Drilled holes 11 None (open hole)  2 Louvered shutter 4 Key punched 6 Wire wrapped 7 Torch cut 9 Drilled holes 11 None (open hole)  3 Saw Cut 10 Other (specify)  6 Lover 10 Contractor Shutter 1 None 1 Non			9 ABS	11 Other (Specify)		
CREEN OR PERFORATION OPENINGS ARE:  1 Continuous slot 3 Mill slot 5 Gauzed wrapped 7 Torch cut 9 Drilled holes 11 None (open hole)  2 Louvered shutter 4 Key punched 6 Wire wrapped 7 Torch cut 10 Other (specify)		0		\ <b>1</b>		
2 Louvered shutter 4 Key punched 6 Wire wrapped CREEN-PERFORATED INTERVALS: From 3 6. 10 6. ft. o 6. ft. from 6. ft. to 6. ft. from 6. ft. o 6. ft. from 6. ft. o 6. ft. from 6. ft. ft. o 6. ft. from 6. ft. ft. o 6. ft. from 6. ft. from 6. ft. from 6. ft. ft. o 6. ft. from				(- <b>r</b>		
From f. to f., From f. to f., From f. to f., From f. to f.	1 Continuous slot 3 Mill slot 5	Gauzed wrapped 7 Toro	ch cut 9 Drilled ho	oles 11 None (open l	hole)	
From f. to f., From f. to f., From f. to f., From f. to f.	2 Louvered shutter 4 Key punched 6	Wire wrapped Saw	Cut 10 Other (sp	ecify)		
From	SCREEN-PERFORATED INTERVALS: From	n		n	./OO ft.	
From	From	n ft. to	ft., Fron	n ft. to .	ft.	
GROUT MATERIAL: 1 Neat cement 2 Cement group 3 Bentonite 4 Other Grout Intervals: From	GRAVEL PACK INTERVALS: From	n 1	ft From	n It. to .	II.	
Grout Intervals: From	1101		101			
What is the nearest source of possible contamination:  1 Septic tank 4 Lateral lines 7 Pit privy 2 Sewer lines 5 Cess pool 3 Sewage lagoon 3 Watertight sewer lines 6 Seepage pit 9 Feedyard Direction from well?  SEWAGE  DIRECTION TO LITHOLOGIC LOG FROM TO LITHOLOGIC LOG FROM TO PLUGGING INTERVALS  TO	GROUT MATERIAL: 1 Neat cement	2 Cement grout 3 Bento	nite 4 Other			
1 Septic tank 2 Lateral lines 7 Pit privy 2 Sewer lines 5 Cess pool 3 Sewage lagoon 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer Storage 15 Oil well/gas well 5 Oil oil well/gas well 5 Oil well/gas well 5 Oil well/gas well 5 Oil oil well/gas well 5 Oil well/gas well 5 Oil well/gas well 5 Oil oil well/gas well 5 Oil oil well/gas well 5 Oil well/gas well 5 Oil o			ft. to	ft., From	ft. toft.	
2 Sewer lines 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer Storage 15 Oil well/gas well below) 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer Storage 15 Oil well/gas well How many feet?  FROM TO LITHOLOGIC LOG FROM TO PLUGGING INTERVALS  O H SCID SHOP STANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugg nder my jurisdiction and was completed on (mo/day/year) This water Well Record was completed on (mo/day/year) This water Well Record was completed on (mo/day/year) This water Well Record was completed on (mo/day/year) STRUCTIONS: Use typewriter or ball point pen. PLEISE PRESS FIRMLY and PRINT clearly. Please fill in Manks, underline of circle the correct answers. See rece copies to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telepts 2-296-5522. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well. Visit to the set of the position of the constructed well. Visit to the constructed well.					1601 ( 16	
3 Watertight sewer lines 6 Seepage pit 9 Feedyard Direction from well?						
Princetion from well?  How many feet?  O O O  ROM TO LITHOLOGIC LOG FROM TO PLUGGING INTERVALS  O SHOW TO SHOW TO SHOW TO SHOW THE WELL OWNER and retain one for your records. Fe of \$5.00 for each constructed well. Visit to the standard well and the record is true to the standard well and					,	
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CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugg nder my jurisdiction and was completed on (mo/day/year)				PLUGGING INT	ERVALS	
CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugg inder my jurisdiction and was completed on (mo/day/year)		10 200				
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CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugg nder my jurisdiction and was completed on (mo/day/year)			10 100 3	THATE DY		
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Ansas Water Well Contractor's License No5 This Water Well Record was completed on (mo/day/year)	110 150 SHILE					
Ansas Water Well Contractor's License No5./ This Water Well Record was completed on (mo/day/year)	CONTRACTOR'S OR LANDOWNER'S	CERTIFICATION: This	water well was (1) as	onstructed (2) reconstruc	ted or (3) plugged	
Ansas Water Well Contractor's License No5 This Water Well Record was completed on (mo/day/year)	nder my jurisdiction and was completed on (m	oo/day/year) 9 2 10 7	Mand this record is t	nie to the hest of my bro	wledge and helief	
by (signature)  NSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in Banks, underline of circle the correct answers. See aree copies to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telep 85-296-5522. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well. Visit to	ansas Water Well Contractor's License No.	This Water W	ell Record was compl	eted on (mo/day/year)	n-23-171 1	
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