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

(to rectify lacking or incorrect information)

| (to room) making or morroo | County: Nemaha |
|--|--|
| Location listed as: | Location changed to: |
| Section-Township-Range: 16-115-7 E | 34-25-12E |
| Fraction (1/4 1/4 1/4): 5U SE SE | SW NW SW NE |
| Other changes: Initial statements: Lat.: 39.08734 | Long.: 96.65557 |
| | |
| Changed to: | Long.: 96.06027 |
| Comments: | |
| verification method: Phone call to well cont "LEO" conversion tool, and may | ractor, Lat/Long. & KG5' oping too/ on KG5 website initials: DRI date: 7/29/2010 |

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.

| | RECORD | Form WWC-5 | | Division of Water | r Resources; App. No. 🗀 | |
|--|--|---|--|--|---|---|
| 1 LOCATION OF | WATER WELL: | Fraction 56 1/4 SR 1/4 SE | Sec | ction Number | Township Number | Range Number R |
| County: //E/ | WHAT | 1 4 5p 74 JE | - '/4 | <i>1</i> 6 | T // S | |
| located within city | etion from nearest town or cit | y street address of well | | titude: | Systems (decimal deg 39. 08-734 | rees, min. of 4 digits) |
| • | | | | ngitude: | 96.65557 | |
| 2 WATER WELL | OWNER: Groundsiure | In Kuhlman | v Ele | evation: | 1175 | |
| RR#, St. Address | , Box # : 7/6 E . 514 S | TIE TIE | a | tum: | | |
| City, State, ZIP C | Code : Hollow, KS. | | | ta Collection I | Method: | |
| 3 LOCATE WELL | | TETED WELL | | | viemou. | , |
| LOCATE WELL | J S 4 DEFINOR COMP | LEIED WELL | r. 12.6 | | | |
| WITH AN "X" I | N Depth(s) Groundwater | Encountered (1) | | ft (2) | ft. (3) | ft. |
| SECTION BOX: | | | | | | |
| N N | | Well water was | | | | |
| | Est. Yieldgpm | : Well water was | ft. | after | hours pumping | gpm |
| | WELL WATER TO BI | E USED AS: 5 Public | water supp | oly 8 Air o | conditioning 11 Inje | ection well |
| NW NE | | llot 6 Oil field w | ater supply | y 9 Dew | ratering 12 Oth | (Specify below) |
| | | ustrial 7 Domestic | | | | |
| SW SE | | | | | | 6 edurm |
| | Was a chemical/bacteri | ological sample submit | tted to Dep | artment? Yes. | No; | If yes, mo/day/yrs |
| | Sample was submitted. | | Water we | ell disinfected? | Yes No | |
| s | | | | | , | |
| 5 TYPE OF CASIN | G USED: 5 Wrought I | ron 8 Concre | te tile | CASINO | JOINTS: Glued | Clamped |
| 1 Steel 3 | RMP (SR) 6 Asbestos-6 ABS 7 Fiberglass or | Cement Other (s | specify belo | ow) | Welded. | < |
| 2 PVC 4. | ABS 7 Fiberglass | HL | PE | | Threaded | •••• |
| Blank casing diamete | er, | ft., Diameter. | in. to | ft., | Diameter | in. toft. |
| Casing height | land surface48 | in., Weight | lbs./ | ft. Wall thic | kness or guage No. جُ | ARII |
| TYPE OF SCREEN | OR PERFORATION MATE | RIAL: | | | | · |
| 1 Steel 3 | Stainless Steel 5 Fibers | glass 7 PVC | 9 ABS | | 11 Other (Specify). | |
| | Galvanized Steal 6 Concr | ` / | 10 Asb | estos-Cement | 12 None used (open | hole) |
| | DRATION OPENINGS ARE | : | | | | |
| SCREEN OR PERFORATION OPENINGS ARE: | | | | | | |
| | | | | | | |
| 2 Louvered shu | itter 4 Key punched 6 W | ire wrapped 8 Sav | w Cut 1 | 0 Other (specify | y) | |
| 2 Louvered shu | atter 4 Key punched 6 WintED INTERVALS: From | ire wrapped 8 Sav ft. to | w Cut 1 | 0 Other (specify ft., From | y) ft. to | ft. |
| 2 Louvered shu SCREEN-PERFORA | tter 4 Key punched 6 Witten TED INTERVALS: From From | ire wrapped 8 Sav ft. to ft. to | w Cut 1 | 0 Other (specify ft., From ft., From | y) ft. to ft. to | |
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