(to rectify lacking or incorrect information)
Location listed as:  County: Brown  Location changed to:
Section-Township-Range: $10-45-15E$ $7-45-15E$
Fraction ( 1/4 1/4 1/4): NE SW NE NW SE SE NE
Other changes: Initial statements: Nemaha County
Changed to: Brown County
Comments:
verification method: Latitude & longitude, KGS "LEO" conversion tool,
well owner's address, area road map, and mapping tool \$
verification method: Latitude \$ /ongitude, KGS'LEO" conversion tool, well owner's address, area road map, and mapping tool \$ aerial photo on KGS website. initials: DRL date: 10/22/2009
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:		Fraction		Section Number   Township Number   Range Number				
County: <b>NEMAHA</b> Distance and direction from nearest town or cit		N/2 1/4 5W/4 N/2 1/4		Colobal Positioning Systems (decimal degrees, min. of 4 digits)				
						grees, min. of 4 digits)		
located within city?	r's address		Latitude: 39. 7/958					
				Longitude: 95.77/40				
	an since		Elevation:					
RR#, St. Address, Box # : 190 145H City, State, ZIP Code : 11 ) 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				Datum:				
City, State, Zir Code	: Wetmore, 4 DEPTH OF COMP	KS. 66550	/22	Data Colle		Method:		
	I DEPTH OF COMP	PLETED WELL	7.9.0		ft.			
LOCATION	5 1/A G 1 1	T . 1 (1)	75	C //	2)	0 (2)	0	
WITH AN "X" IN								
SECTION BOX: WELL'S STATIC WATER LEVELft. below land surface measured on mo/day/yr 8//.4							y/yr <b>0//.4/v.</b> 0	
	Pump test data: Well water was							
WELL WATER TO BE USED AS: 5 Public water supply 9 Air conditioning 11 Injection wall								
NW  <b>W</b> E	Domestic 3 Feed	dlot 6 Oil field v	vater sur	oply	9 Dew	vatering 12 O	ther (Specify below)	
W E		ustrial 7 Domestic						
	2		`	,				
SW SE	Was a chemical/bacteri	iological sample submi	itted to I	Department?	? Yes.	No .X;	If yes, mo/day/yrs	
	Sample was submitted.		Water	r well disint	fected?	Yes No		
s								
5 TYPE OF CASING US	ED: 5 Wrought I	ron 8 Concre	ete tile	(	CASINO	G JOINTS: Glued.	Clamped	
1 Steel 3 RMP	(SR) 6 Asbestos-	Cement 9 Other (	specify	below)			• • • • • • • • • • • • • • • • • • • •	
(2 PVC) 4 ABS	7 Fiberglass					Threade	d	
Blank casing diameter	ن in. to الم	ft., Diameter	iı	n. to	ft.,	Diameter	. in. toft.	
Blank casing diameter								
TYPE OF SCREEN OR PE								
	less Steel 5 Fiber					11 Other (Specify)		
	nnized Steal 6 Conc		10 A	Asbestos-Ce	ement	12 None used (ope	n hole)	
SCREEN OR PERFORATION OPENINGS ARE:								
1 Continuous slot 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)								
2 Louvered snutter	A Key punched o w	fre wrapped 8 Sa	/ / O	ouner	(specify	() ft. to	A	
SCREEN-PERFORATED INTERVALS: From 6t. to 100 ft., From ft. to ft.								
GRAVEL PACK INTERVALS: From								
From ft. to ft. From ft. to ft.								
				-				
6 GROUT MATERIAL:	1 Neat cement 2	Cement grout Bent	tonite	4 Other				
Grout Intervals: From	13 ft. to .2.	ft., From	<del></del>	ft. to	f	t., From <del></del>	ft. toft.	
What is the nearest source								
1 Septic tank	4 Lateral lines			ock pens		secticide storage	6 Othe (specify	
2 Sewer lines			Fuel st	•		oandoned water well		
3 Watertight sewer li				er storage		l well/gas well	HOUSE	
Direction from well?				y feet?		N LICONG N		
FROM TO	LITHOLOGIC	LOG	FROM			PLUGGING IN	ERVALS	
	AY BROWN		90	100	SUM	+LE		
10 37 CLA				-				
	MESTONE			<del>                                     </del>				
43 45 LINI	" Sanit Brick)	21						
	12,6PM							
55 62 CFA	MESOONE							
	12 CRAY	a left of All or						
73 75 EFA	WASTINE BRE	KIZIV, 1720						
75 65 SIIN	42 6KMY			+ +				
7 CONTRACTORS OF	LANDOWNED'S CE	DTIELCATION. TI	in street	woll 6	1	muotod (2) massasta	atad on (2) = 11	
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)								
Kansas Water Well Contra	vas completed on (mo/	this Woter V	z and Wall Das	unis record	is true i	lon (mo/day/yaa4)	wiedge and bener.	
						i oli jillo/day/yezg) .!	· <del>-</del> p. «p. «.»	
under the business name of INSTRUCTIONS: Use typewrit	ter or hall point pen PIFA	SE PRESS FIRMLY and PR	U <u>ک</u> SINT clear	/ (signature		s, underline or orcle the	correct answers Send ton	
three copies to Kansas Departmen								
785-296-5522. Send one to								

http://www.kdheks.gov/waterwell/index.html.