

CORRECTION(S) TO WATER WELL RECORD (WWC-5)
(to rectify lacking or incorrect information)

County: Brown

Location listed as:

Location changed to:

Section-Township-Range: 6-25-15E

6-25-15E

Fraction (1/4 1/4 1/4): NW SW SW

NW NW SW SW

Other changes: Initial statements: Nemaha County

Changed to: Brown County

Comments: _____

verification method: Latitude & longitude, KGS' "LEO" conversion tool,
and mapping tool & aerial photo on KGS website.

initials: DRB date: 10/27/2009

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

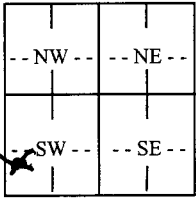
Form WWC-5

Division of Water Resources; App. No.

1 LOCATION OF WATER WELL: County: <u>Nebraska</u>	Fraction <u>NW 1/4 SW 1/4 SW 1/4</u>	Section Number <u>6</u>	Township Number <u>T 2 S</u>	Range Number <u>R 15 EW</u>
Distance and direction from nearest town or city street address of well if located within city? <u>— see below</u>		Global Positioning Systems (decimal degrees, min. of 4 digits) Latitude: <u>39.90319</u> Longitude: <u>95.78751</u> Elevation: <u>1344</u> Datum: <u>WGS 84</u> Data Collection Method: <u>Hand held</u>		

2 WATER WELL OWNER: Sabetha Bank
RR#, St. Address, Box # :
City, State, ZIP Code : Hwy 25/main st

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: N W E S	4 DEPTH OF COMPLETED WELL <u>131'</u> ft. Depth(s) Groundwater Encountered (1)..... ft. (2)..... ft. (3)..... ft. WELL'S STATIC WATER LEVEL..... ft. below land surface measured on mo/day/yr..... Pump test data: Well water was..... ft. after..... hours pumping..... gpm Est. Yield..... 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 <u>Other (Specify below)</u> 2 Irrigation 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well <u>Ground Sowers</u> Was a chemical/bacteriological sample submitted to Department? Yes No <u>X</u> ; If yes, mo/day/yrs Sample was submitted..... Water well disinfected? Yes No <u>X</u>
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5 TYPE OF CASING USED: 5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued..... Clamped.....
1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded
2 PVC 4 ABS 7 Fiberglass HDPE Threaded.....
Blank casing diameter 3.0 in. to 131 ft., Diameter..... in. to..... ft., Diameter..... in. to..... ft.
Casing height above land surface..... 60 in., Weight..... lbs./ft. Wall thickness or guage No. SPR 11
TYPE OF SCREEN OR PERFORATION MATERIAL:
1 Steel 3 Stainless Steel 5 Fiberglass 7 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 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 8 Saw cut 10 Other (specify).....
SCREEN-PERFORATED INTERVALS: From..... ft. to..... ft., From..... ft. to..... ft.
GRAVEL PACK INTERVALS: From..... ft. to..... ft., From..... ft. to..... ft.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other.....
Grout Intervals: From 131 ft. to 0 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 14 Other (specify below)
2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 14 Abandoned water well
3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer storage 15 Oil well/gas well Building
Direction from well? South How many feet? 15'

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	42	Clay			
42	110	Alt. Shale			
110	113	Sand Gravel			
113	118	Weathered Limestone			
118	131	Alt Shale			

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) .. 7/29/06 .. and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 760 .. This Water Well Record was completed on (mo/day/year) 10/14/06 .. under the business name of Associated Drilling Inc by (signature) [Signature]

INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT 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 constructed well. Visit us at <http://www.kdheks.gov/waterwell/index.html>.