

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

(to rectify lacking or incorrect information)

County: Sumner

Location listed as:

Section-Township-Range: 24-305-1E

Fraction (  $\frac{1}{4}$   $\frac{1}{4}$   $\frac{1}{4}$ ): None Given

Location changed to:

24-305-1E

SW SW NW

Other changes: Initial statements: \_\_\_\_\_

Changed to: \_\_\_\_\_

Comments: \_\_\_\_\_

verification method: Legal and written descriptions, position on plat map,  
and Belle Plaine 1:24,000 topo. map.

initials: DRL date: 3/31/2005

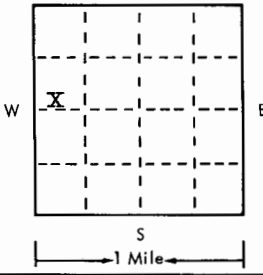
submitted by: Kansas Geological Survey, Data Resources Library, 1930 Constant Ave., Lawrence, KS 66047-3726  
to: Kansas Dept of Health & Environment, Bureau of Water, 1000 SW Jackson, Suite 420, Topeka, KS 66612-1367.

USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

T R EW sec 1/4 1/4 1/4 No.

WATER WELL RECORD  
KSA 82a-1201-1215

Kansas State Dept. Of Health  
(Water Well Contractors)  
Forbes-Bldg. 740  
Topeka, Kansas 66620

1 Location of well:	County <b>Sumner</b>	Township name <b>Belle Plaine</b>	Fraction	Section number <b>24</b>	Town number <b>30S</b>	Range number <b>1E</b>
Distance and direction from nearest town or city: <b>2 1/2 North of Belle Plaine, Kansas</b>			3 Owner of well: <b>R &amp; R Inc..</b> Address: <b>R #2 Belle, Plaine, Kansas 67013</b>			
Locate with "X" in section below: 		Sketch map: <b>Larry Jenkins Lot 1</b>		4 Well depth: <b>35</b> ft. Date of completion <b>3-11-75</b> Well diameter <b>11</b> in.		
2 Type and color of material		From		To		5 <input type="checkbox"/> Cable tool <input checked="" type="checkbox"/> Rotary <input type="checkbox"/> Driven <input type="checkbox"/> Dug <input type="checkbox"/> Hollow rod <input type="checkbox"/> Jetted <input type="checkbox"/> Bored <input type="checkbox"/> Reverse rotary
						6 Use: <input checked="" type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry <input type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input type="checkbox"/> Commercial <input type="checkbox"/> Test well <input type="checkbox"/>
Dirt and Blow sand		0		5		7 Casing: Material <b>Styrene</b> Height: above/below <b>///</b> Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <b>12</b> in. Diam. <b>5</b> in. to <b>35</b> ft. depth Drive shoe? <input type="checkbox"/> Yes <input type="checkbox"/> No <b>5</b> in. to <b>35</b> ft. depth
Sand		5		32		8 Screen: Manufacturer <b>Sunflower Plastic</b> Type <b>Styrene</b> Dia. <b>5"</b> Slot/gauze <b>.005</b> Length <b>10'</b> Set between <b>25</b> ft. and <b>35</b> ft. Fittings: Gravel pack <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Size range of material <b>1/4 - 1/8"</b>
Shale		32		35		9 Static water level: <b>16</b> ft. below land surface Date <b>3-11-75</b>
						10 Pumping level below land surfaces: ____ ft. after ____ hrs. pumping ____ g.p.m. ____ ft. after ____ hrs. pumping ____ g.p.m. Estimated maximum yield ____ g.p.m.
						11 Water sample submitted: <input type="checkbox"/> Yes <input type="checkbox"/> No Date ____
						12 Well head completion: <b>capped</b> <input type="checkbox"/> Pitless adapter <b>12</b> <input checked="" type="checkbox"/> Inches above grade
						13 Well grouted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Depth: From ____ ft. to <b>11</b> ft.
						14 Nearest source of possible contamination: <b>NONE</b> ft. ____ Direction ____ Type ____ Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
						15 Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name ____ Model number ____ HP ____ Volts ____ Length of drop pipe ____ ft. capacity ____ g.m.p. Type: <input type="checkbox"/> Submersible <input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating <input type="checkbox"/> Centrifugal <input type="checkbox"/> Other
16 Remarks: elevation <b>Septic tank to be installed over 50' East of well. Septic tank was not installed at time well was drilled.</b>						17 Water well contractor's certification: This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief. <b>Harp Well &amp; Pump, Inc. 236</b> Business name <b>Wichita, Kansas 67209</b> License No. ____ Address ____ Signed <b>Harold Arnold</b> Date <b>3-15-75</b> Authorized representative

Forward the white, blue and pink copies to the Kansas State Dept. Of Health.

Form WWC-5