CORRECTION TO WATER WELL RECORD (WWC-5)

The following correction(s) was made to the attached WWC-5 log, in order to file the item or to rectify lacking or incorrect information.

Fraction (1/4 1/4 1/4) Section-Township-Range changed:

listed as 8 - 30 S - 4 E

changed to SE, SE, NE, 8 - 30 S - 4 E

Other changes: Initial statements: _____

_____

Changed to: _____

_____

Comments: _____

_____

verification method: Written description on form, & Udall, KS, 1:24,000 topo. map. initials: DRL date: 2/3/99

submitted by: Kansas Geological Survey, Data Resources Library, 1930 Constant Ave., Lawrence, KS 66047-3726
to: Kansas Dept of Health & Environment Bureau of Water Industrial Programs, Bldg 283, Forbes Field, KS 66620

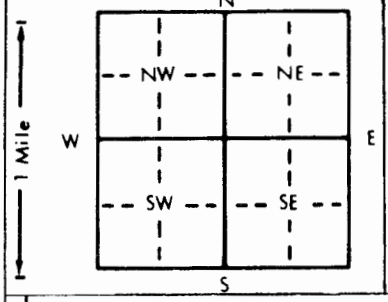
WATER WELL RECORD Form WWC-5 KSA 82a-1212

1 LOCATION OF WATER WELL: County: Cowley | Fraction: ¼ ¼ ¼ | Section Number: 8 | Township Number: T 30S S | Range Number: R 4E E/W

Distance and direction from nearest town or city street address of well if located within city?
1¼ miles north of Rock on west side

2 WATER WELL OWNER: Gene Maxwell
RR#, St. Address, Box # : P.O. Box 219
City, State, ZIP Code : Douglas, Kansas 67039
Board of Agriculture, Division of Water Resources
Application Number:

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:



4 DEPTH OF COMPLETED WELL 100 ft. ELEVATION:
Depth(s) Groundwater Encountered 1. ft. 2. ft. 3. ft.
WELL'S STATIC WATER LEVEL 15 ft. below land surface measured on mo/day/yr 10-10-94
Pump test data: Well water was ft. after hours pumping gpm
Est. Yield gpm: Well water was ft. after hours pumping gpm
Bore Hole Diameter 9 in. to 100 ft., and in. to ft.
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 12 Other (Specify below)
2 Irrigation 4 Industrial 7 Lawn and garden only 10 Monitoring well
Was a chemical/bacteriological sample submitted to Department? Yes No X ; If yes, mo/day/yr sample was submitted
Water Well Disinfected? Yes X No

5 TYPE OF BLANK CASING USED: 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued X Clamped
1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded
(2) PVC 4 ABS 7 Fiberglass Threaded
Blank casing diameter 5 in. to 60 ft., Dia in. to ft., Dia in. to ft.
Casing height above land surface 24 in., weight lbs./ft. Wall thickness or gauge No. SDR26
TYPE OF SCREEN OR PERFORATION MATERIAL: (7) PVC 10 Asbestos-cement
1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 11 Other (specify)
2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 12 None used (open hole)
SCREEN OR PERFORATION OPENINGS ARE: 5 Gauzed wrapped (8) Saw cut 11 None (open hole)
1 Continuous slot 3 Mill slot 6 Wire wrapped 9 Drilled holes
2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify)
SCREEN-PERFORATED INTERVALS: From 60 ft. to 100 ft., From ft. to ft.
From ft. to ft., From ft. to ft.
GRAVEL PACK INTERVALS: From 20 ft. to 100 ft., From ft. to ft.
From ft. to ft., From ft. to ft.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout (3) Bentonite 4 Other
Grout Intervals: From 20 ft. to 3 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 14 Abandoned water well
2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 15 Oil well/Gas well
3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer storage 16 Other (specify below)
13 Insecticide storage
Direction from well? How many feet?

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	8	Soil			
8	30	Clay (brown)			
30	43	Clay (blue gray)			
43	50	Lime w/ some sand			
50	100	Lime w/shale stks			

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) 10-10-94 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 171 This Water Well Record was completed on (mo/day/yr) 10-11-94 under the business name of G & S Drilling by (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, Topeka, Kansas 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.

OFFICE USE ONLY T R E/W SEC. ¼ ¼ ¼