

County: Cherokee Fraction NE NW NW SE Sec. 32 T 33 S R 24 EW

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

Owner: Leon King

Location was listed as:

Section-Township-Range: None Given

Fraction ( $\frac{1}{4}$   $\frac{1}{4}$   $\frac{1}{4}$ ): \_\_\_\_\_

Location changed to:

32-33S-24E

NE NW NW SE

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

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

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

Verification method: Latitude & Longitude, KGS' "LEO" conversion tool,  
and mapping tool & aerial photos on KGS website.

Submitted by: Kansas Geological Survey, Data Resources Library, 1930 Constant Ave., Lawrence, KS 66047-3726 initials: DRJ date: 9/4/2013  
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.

<b>1 LOCATION OF WATER WELL:</b> County: <u>Cherokee</u> Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here <input type="checkbox"/> <u>South of SE Clem Rd and north of SE Boston Mill Rd.</u>		Fraction <div style="display: flex; justify-content: space-around;"> <span>1/4</span> <span>1/4</span> <span>1/4</span> <span>1/4</span> </div>		Section Number <div style="display: flex; justify-content: space-around;"> <span>T</span> <span>S</span> </div>		Township No. <div style="display: flex; justify-content: space-around;"> <span>R</span> <span>E</span> <span>W</span> </div>		Range Number <div style="display: flex; justify-content: space-around;"> <span>E</span> <span>W</span> </div>			
<b>2 WATER WELL OWNER:</b> <u>Leon King</u> RR#, Street Address, Box #: <u>3515 S.E. 70</u> City, State, ZIP Code: <u>Columbus, Ks.</u>		<b>Global Positioning System (GPS) information:</b> Latitude: <u>37°07'34.2"</u> (in decimal degrees) Longitude: <u>94°48'11.0"</u> (in decimal degrees) Elevation: <u>845</u> Datum: <input checked="" type="checkbox"/> WGS 84, <input type="checkbox"/> NAD 83, <input type="checkbox"/> NAD 27 Collection Method: <input checked="" type="checkbox"/> GPS unit (Make/Model: _____) <input type="checkbox"/> Digital Map/Photo, <input type="checkbox"/> Topographic Map, <input type="checkbox"/> Land Survey Est. Accuracy: <input checked="" type="checkbox"/> <3 m, <input type="checkbox"/> 3-5 m, <input type="checkbox"/> 5-15 m, <input type="checkbox"/> >15 m									
<b>3 LOCATE WELL WITH AN "X" IN SECTION BOX:</b> <div style="text-align: center;">N</div> <table border="1" style="width: 100px; margin: auto;"> <tr> <td style="width: 50px;">NW</td> <td style="width: 50px;">NE</td> </tr> <tr> <td style="width: 50px;">SW</td> <td style="width: 50px;">SE</td> </tr> </table> <div style="text-align: center;">S</div> <div style="text-align: center;">-----1 mile-----</div>		NW	NE	SW	SE	<b>4 DEPTH OF COMPLETED WELL</b> <u>470</u> ft. Depth(s) Groundwater Encountered (1) <u>173</u> 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: <u>70</u> gpm. Well water was _____ ft. after _____ hours pumping _____ gpm Bore Hole Diameter <u>8 3/4</u> in. to <u>210</u> ft., and <u>6</u> in. to <u>470</u> ft. WELL WATER TO BE USED AS: <input type="checkbox"/> Public water supply <input type="checkbox"/> Geothermal <input type="checkbox"/> Injection well <input checked="" type="checkbox"/> Domestic <input type="checkbox"/> Feedlot <input type="checkbox"/> Oil field water supply <input type="checkbox"/> Dewatering <input type="checkbox"/> Other (Specify below) <input type="checkbox"/> Irrigation <input type="checkbox"/> Industrial <input type="checkbox"/> Domestic-lawn & garden <input type="checkbox"/> Monitoring well Was a chemical/bacteriological sample submitted to Department? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, mo/day/yr sample was submitted _____ Water well disinfected? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No					
NW	NE										
SW	SE										
<b>5 TYPE OF CASING USED:</b> <input checked="" type="checkbox"/> Steel <input type="checkbox"/> PVC <input type="checkbox"/> Other _____ CASING JOINTS: <input type="checkbox"/> Glued <input type="checkbox"/> Clamped <input checked="" type="checkbox"/> Welded <input type="checkbox"/> Threaded Casing diameter <u>6 5/8</u> in. to <u>210</u> ft., Diameter _____ in. to _____ ft., Diameter _____ in. to _____ ft. Casing height above land surface <u>12</u> in., Weight <u>13</u> lbs./ft., Wall thickness or gauge No. <u>188</u> TYPE OF SCREEN OR PERFORATION MATERIAL: <input type="checkbox"/> Steel <input type="checkbox"/> Stainless Steel <input type="checkbox"/> PVC <input type="checkbox"/> Other (Specify) <u>open hole</u> <input type="checkbox"/> Brass <input type="checkbox"/> Galvanized Steel <input checked="" type="checkbox"/> None used (open hole) SCREEN OR PERFORATION OPENINGS ARE: <input type="checkbox"/> Continuous slot <input type="checkbox"/> Mill slot <input type="checkbox"/> Gauze wrapped <input type="checkbox"/> Torch cut <input type="checkbox"/> Drilled holes <input type="checkbox"/> None (open hole) <input type="checkbox"/> Louvered shutter <input type="checkbox"/> Key punched <input type="checkbox"/> Wire wrapped <input type="checkbox"/> Saw cut <input type="checkbox"/> Other (specify) _____ SCREEN-PERFORATED INTERVALS: From _____ ft. to _____ ft., From _____ ft. to _____ ft. GRAVEL PACK INTERVALS: From _____ ft. to _____ ft., From _____ ft. to _____ ft.											
<b>6 GROUT MATERIAL:</b> <input type="checkbox"/> Neat cement <input checked="" type="checkbox"/> Cement grout <input type="checkbox"/> Bentonite <input type="checkbox"/> Other _____ Grout Intervals: From <u>1</u> ft. to <u>209</u> ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft. What is the nearest source of possible contamination: <input checked="" type="checkbox"/> Septic tank <input type="checkbox"/> Lateral lines <input type="checkbox"/> Pit privy <input type="checkbox"/> Livestock pens <input type="checkbox"/> Insecticide storage <input type="checkbox"/> Other (specify below) <input type="checkbox"/> Sewer lines <input type="checkbox"/> Cesspool <input type="checkbox"/> Sewage lagoon <input type="checkbox"/> Fuel storage <input type="checkbox"/> Abandoned water well <input type="checkbox"/> Watertight sewer lines <input type="checkbox"/> Seepage pit <input type="checkbox"/> Feedyard <input type="checkbox"/> Fertilizer storage <input type="checkbox"/> Oil well/gas well Direction from well <u>Northwest</u> Distance from well <u>100'</u>											
FROM		TO		LITHOLOGIC LOG		FROM		TO		LITHO. LOG (cont.) or PLUGGING INTERVALS	
0		40		over Burden							
40		128		Black shale							
128		173		open							
173		184		broken formation							
184		224		lime							
224		375		flint							
375		384		Northwell							
384		470		Dolomite							
<b>7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:</b> This water well was <input checked="" type="checkbox"/> constructed, <input type="checkbox"/> reconstructed, or <input type="checkbox"/> plugged under my jurisdiction and was completed on (mo/day/year) <u>7-15-13</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>732</u> This Water Well Record was completed on (mo/day/year) <u>8/14/13</u> under the business name of <u>G.B. Environmental</u> by (signature) <u>James Buckle</u> <b>INSTRUCTIONS:</b> Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks and check the correct answers. Send one copy to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5524. Send one copy to WATER WELL OWNER and retain one for your records. Include fee of \$5.00 for each constructed well. Visit us at <a href="http://www.kdheks.gov/waterwell/index.html">http://www.kdheks.gov/waterwell/index.html</a>											