| County: Montgomery Fraction SE NW SE | Sec. /3 T 3.5 S R /4 (E/W |
|---|-------------------------------|
| CORRECTION(S) TO WATER WELL COMP | LETION RECORD (WWC-5) |
| Owner: Jacob B. Wade | information) |
| Location was listed as: | Location changed to: |
| Section-Township-Range: 13-355-14 E | 13-355-14E |
| Section-Township-Range: 13-355-14 E Fraction (1/4 1/4 1/4): None Given | SE NW SE |
| Other changes: Initial statements: | |
| | |
| Changed to: | |
| | |
| Comments: | |
| | |
| Verification method: Written & legal descrip and mapping tool & aerial photo. Submitted by: Kansas Geological Survey. Data Resources Library, 1930 Co | tions, position on plat map, |
| and mapping tool & aerial photos | s on KGS website. |
| | initials: ORL date: 9/26/2013 |
| Submitted by: Kansas Geological Survey, Data Resources Library, 1930 Co to: Kansas Dept of Health & Environment, Bureau of Water, 1000 SW Jack | |
| | • |

| WAT | ER WELL REC | CORD | Form WWC | 5 | Division of | Water | Resources; App. No. | | | | |
|--|---|---|-------------------------------------|-------------------------|---------------------------|----------|-----------------------|-------------------------|--|--|--|
| | OCATION OF WA | | Fraction | | Section Num | ber | Township Number | Range Number | | | |
| C | ounty: MONTGO | mery | 1/4 1/4 | 1/4 | | | T 35 (S) | R EW | | | |
| D | istance and direction | trom nearest town o | or city street address of w | ell if | Global Positio Latitude: | oning | Systems (decimal degr | rees, min. of 4 digits) | | | |
| located within city? 2.5 miles | | | 3 outh of 1700 | | Latitude: | | | | | | |
| 2 WATER WELL OWNER: Jacob | | | N War & | Elevation: | | | | | | | |
| K | K#, St. Address, Bo | x # . 15 V 35 II | Turo KS, 873 | lia. | Datum: | | | | | | |
| | City, State, ZIP Code | | · | Data Collection Method: | | | | | | | |
| 1 | OCATE WELL'S | 4 DEPTH OF CO | MPLETED WELL | | | ft. | , , , , , , | | | | |
| | WITH AN "X" IN SECTION BOX: Depth(s) Groundwater Encountered (1) | | | | | | | | | | |
| | | | | | | | | | | | |
| | N | Pump test data: Well water wastt. after nours pumping gpm | | | | | | | | | |
| | Est. Yield | | | | | | | | | | |
| | - NW NE | | | | | | | her (Specify below) | | | |
| W _ | E | | | | & garden) 10 | | | | | | |
| | - sw - X se | | | ` | , | | 1 months | * | | | |
| | - - / SE | | cteriological sample subr | | | | | | | | |
| Lum | S | Sample was submi | tted | . Wat | er well disinfed | cted? | Yes No | •••• | | | |
| E Try | YPE OF CASING U | ICED: 5 Wear | ght Iron 8 Cond | roto tilo | , CA | CINIC | G JOINTS: Glued | Clamped | | | |
| 3 1 | | P (SR) 6 Asbes | | | y below) | MIGF | | Clamped | | | |
| | | 5 7 Fiberg | glass ft., Diameter | | | | Threaded | | | | |
| Blan | k casing diameter | in. to | ft., Diameter | | in. to | ft., | Diameter | in. toft. | | | |
| Casi | ng height above land | surface | in., Weight | | .lbs./ft. Wa | ill thic | kness or guage No | l | | | |
| TYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel 3 Stainless Steel 5 Fiberglass APVC 9 ABS 11 Other (Specify) | | | | | | | | | | | |
| | 2 Brass 4 Gal | vanized Steal 6 C | Concrete tile 8 RM (SR | | | | 12 None used (open | | | | |
| SCR | EEN OR PERFORA | TION OPENINGS A | ARE: | | 0.75.2114.1 | 1 1 | 11 N (1- | -1-1 | | | |
| 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 | | | | | | | | | | | |
| From | | | | | | | | | | | |
| | GRAVEL PACK | CINTERVALS: Fr | omft. to . om. J. 5. O. ft. to . | (2) | S ft., Fro | om | tt. to | 1t. | | | |
| | | rice. | 0111. | | , | JIII | | 1t. | | | |
| , | ROUT MATERIAI | : 1 Neat cement | 2 Cement grout 3 Be | ntonite | 4 Other | | | | | | |
| | at Intervals: From t is the nearest source | | | | . ft. to | 1 | t., From | ft. toft. | | | |
| vviia | 1. Septic tank | | | 10 Lives | tock pens | 13 Ins | secticide storage | 16 Other (specify | | | |
| | 2 Sewer lines | 5 Cess pool | 8 Sewage lagoon | l1 Fuel s | | | oandoned water well | below) | | | |
| ъ. | 3 Watertight sewer | 1 0 1 | oit 9 Feedyard | 12 Fertili | | | | | | | |
| FRQ | | LITHOLO | | FRON | ny feet? | | PLUGGING INT | FRVALS | | | |
| TKG | | 2 9 , / | , GIO DOO | INON | | | 12000HO HVI | | | | |
| 7. | 20 | C/2 x & S | 1-1-0 | | | | | | | | |
| 9 | 0 25 6 | 10 c (- | 1 | | | | | | | | |
| 2 | 5/100 | SHOLE | | | | | | | | | |
| 1 | 20160 | 6/10/1 | 2 a | - | | | | | | | |
| 1,6 | 702/8 | 3115 | 9/ITex | | | | | | | | |
| 47 | 15 250 2 | 56714 | 3 | | | | | | | | |
| | | | | : | | | | 4 | | | |
| 700 | NTD ACTOR'S O | DIANDOWNED: | S CEDTIFICATION. T | hie wate | r well wes (1) | coneti | nicted (2) reconstruc | ted or (3) plugged | | | |
| 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 Contractor's License No | | | | | | | | | | | |
| under the business name of the first by (signature) by (signature) | | | | | | | | | | | |
| INSTRUCTIONS: Use typewriter or ball point pen. <u>PLEASE PRESS FIRMLY</u> and <u>PRINT</u> clearly. Please fill in blanks, underline or which 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. | | | | | | | | | | | |