

County: CHEROKEE Fraction: SW NE Sec. 4 T. 35 S R. 25 E

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

Owner: SMITH, DANNY

If location corrected, was listed as:

Section-Township-Range: 5-34-25

Fraction (1/4 calls): SW SE SE

Location changed to:

4-35-25E

SW NE

Other changes: Initial statements: _____

Changed to: _____

Comments: _____

Verification method: Google maps and KGS mapper based on directions on WWC-5 and speaking with driller

Initials: SH Date: 09-17-2019

Submitted by: Kansas Geological Survey, Data Resources Library, 1930 Constant Ave., Lawrence, KS 66047-3724
 Kansas Dept. of Health & Environment, Bureau of Water, 1000 SW Jackson, Suite 420, Topeka, KS 66612-1367

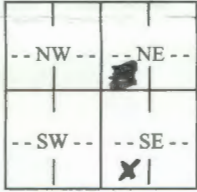
WATER WELL RECORD

Form WWC-5

Division of Water Resources; App. No.

1 LOCATION OF WATER WELL: County: <u>CHE ROKEE</u>	Fraction <u>SW 1/4 SE 1/4 SE 1/4</u>	Section Number <u>5</u>	Township Number <u>T 34 S 5</u>	Range Number <u>R 25 E/W</u>
Distance and direction from nearest town or city street address of well if located within city? <u>3 mi E of Baxter spring N side</u>		Global Positioning Systems (decimal degrees, min. of 4 digits) Latitude <u>N 37 1' 31</u> Longitude <u>W 94 40' 38</u> Elevation: _____ Datum: _____ Data Collection Method: <u>OX WINE</u>		

2 WATER WELL OWNER: DANNY SMITH
RR#, St. Address, Box # : 8511 SE H1 166
City, State, ZIP Code : BAXTER SPRINGS KS 66713

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: N  W E S	4 DEPTH OF COMPLETED WELL <u>325</u> ft. Depth(s) Groundwater Encountered (1) <u>280</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 _____ 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 <u>Domestic</u> 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below) 2 Irrigation 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well _____ Was a chemical/bacteriological sample submitted to Department? Yes _____ No <u>X</u> ; If yes, mo/day/yr Sample was submitted _____ Water well disinfected? Yes <u>X</u> No _____
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5 TYPE OF CASING USED: 1 Steel 3 RMP (SR) 5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued _____ Clamped _____
2 PVC 4 ABS 7 Fiberglass 9 Other (specify below) Welded _____
Blank casing diameter 6 5/8 in. to 40 ft., Diameter _____ in. to _____ ft., Diameter _____ in. to _____ ft.
Casing height above land surface 2 in., Weight 1.3 lbs./ft. Wall thickness or gauge No. 1.88
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 0 ft. to 40 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 16 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
Direction from well? _____ How many feet? _____

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
<u>0</u>	<u>8</u>	<u>CLAY</u>			
<u>8</u>	<u>28</u>	<u>LIME</u>			
<u>28</u>	<u>63</u>	<u>SHALE GREY</u>			
<u>63</u>	<u>107</u>	<u>LIME</u>			
<u>107</u>	<u>136</u>	<u>BROWN SHALE</u>			
<u>136</u>	<u>325</u>	<u>LIME STONE</u>			

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) 8-20-19 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 9210 This Water Well Record was completed on (mo/day/year) 8-25-19 under the business name of GARY SISK DRILLING by (signature) [Signature] 816-917-4531

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>.