County:	Washington	Fraction: _	NW NE NE S	SE_	Sec	27	_ T	3	S	R	4	E
CORRECTIO	N(S) to WATER WE	LL COMPLE	TION RECORD	Forn	n WWC	C-5 (to	rectify	lackin	g or in	correct	t infori	mation)
Owner:	Rice											
	ected, was listed as:				Locat	ion cha	nged to	:				
Section-Townsh	ip-Range:											
Section-Township-Range:SW NE SE Fraction (1/4 calls):					NW NE NE SE							
	: Initial statements:											
Changed to:	la	titude: 39.76	6179 longitud	e: - 9	6.958	76						
Comments:												
Verification met	thod: Coordinate	es provided	by landowner	(fron	n Goo	gle Ea	arth, d	atum	WG	S 84)	and	
verified by F	Pam Chaffee, KD	HE.										
						Initials:	DLS	I	Date: _	07/31	1/201	7
_	Kansas Geological Kansas Dept. of He	Survey, Data R	esources Library,	1930 C	Constant	Ave., L	awrence	e, KS (	66047-	3726		

(rev 3/23/2017)

WATE	R WEI	LL RECORD	Form W	WC-5	Di	ivision of Wate	r Resources App. No	0.	
		OF WATER WELL:	Fraction		Secti	on Number	Township No.	Range Number	
		ASUING TON	SW4NE4SI			27	T 3 S		
		Address of Well Location; i					System (GPS) in		
from	nearest 1	own or intersection: If at a 4, IEAST AND "	owner's address, check	k here	Latiti	ude:		(in decimal degrees)	
	NOK	4, IL43/ AND	Z NOR CON OF	CKERM./E					
					Datur	n:  WGS 8	4, □ NAD 83, □	 NAD 27	
2 WA	TER W	ELL OWNER: JIM'	RICE		Colle	ction Method:			
RR#	Street A	Address, Box #: /353	VICTORY RD	_		GPS unit (Mak	ce/Model:	)	
City	, State, Z	IP Code : GRE	ENLEAF, KS	6 6694	Fet A			c Map, ☐ Land Survey 5-15 m, ☐ >15 m	
3 LOC	ATE WE	II	•				э m, э-э m,	5-15 m,	
	H AN "X	" IN 4 DEPTH OF (	COMPLETED WEI						
SECT	TION BO	Depth(s) Ground	lwater Encountered	(1)	ft.	(2)	ft. (	3) ft.	
	N		C WATER LEVEL						
		Pump	test data: Well wat	er was	ti	t. after	hours pum	ping gpm	
	V   N	E EST. YIELD	eterin. to .	er was	II ft and	. arter	to fours pum	ping gpm	
W			TO BE USED AS: [					njection well	
	V   S							Other (Specify below)	
SV	V   S	☐ Irrigation							
<u> </u>			bacteriological sampl				Yes No		
	S		day/yr sample was su						
	1 mile	Water well disin	fected? Ves 🗌	No					
		SING USED:   Steel							
CASIN	G JOIN	rs: 🔽 Glued 🗌 Clan	nped 🗌 Welded	☐ Threade	d				
Casin	g diamet	er 5 in. to . <b>3.8</b> above land surface	ft., Diameter	in.	to	ft., D	iameter	. in. to ft.	
Casin	g height	above land surface	<b>Q</b> in., Weigh	t <b>2</b> .9. <b>0</b>	lbs./1	tt., Wall thic	kness or gauge N	0 <b>/./2.9</b>	
TYPE OF SCREEN OR PERFORATION MATERIAL:  Steel Stainless Steel PVC Other (Specify)									
_ =	Brass		None used (open 1	hole)	) romor (	Specify)			
SCREE	N OR P	ERFORATION OPENING	S ARE:						
	Continuo	ous slot  Mill slot	Gauze wrapped	☐ Torch cut	Dr	illed holes	☐ None (open hole	e)	
SCREE	Louvered	Shutter	Wire wrapped	Saw cut	, ∐ Ot≀	ner (specify)			
☐ Continuous slot         ☐ Mill slot         ☐ Gauze wrapped         ☐ Torch cut         ☐ Drilled holes         ☐ None (open hole)           ☐ Louvered shutter         ☐ Key punched         ☐ Wire wrapped         ☐ Saw cut         ☐ Other (specify)           SCREEN-PERFORATED INTERVALS:         From.          ft. to            From.          ft. to          ft., From         ft. to           GRAVEL PACK INTERVALS:         From.          ft. to          ft., From         ft. to									
	GRAV	EL PACK INTERVALS:	From29	ft. to <b>5</b>	8	ft., From	ft.	to ft.	
								to ft.	
6 GRO	UT MA	TERIAL: Neat ceme							
Grout In		From ft. to		n	ft. to	ft.,	From	. ft. toft.	
		est source of possible conta		□ r :			п ол	( '6 1 1 )	
	Septic ta		es Pit privy Sewage lagoon	Livestock Fuel storage		☐ Insecticide ☐ Abandoned		er (specify below)	
		ht sewer lines		Fertilizer s		Oil well/ga			
Direc	tion from	n well NONE RIZI		Distance	from w	ell			
FROM	ТО	LITHOLOG	IC LOG	FROM	TO	LITHO. LO	OG (cont.) or PLU	GGING INTERVALS	
0	17	BROWNCLAY							
17	38	GRAY CLAY							
38 40 44	40	SANDSTOWE							
40	44	GRAY CLAY	-1 1						
77	53	SAND (FINE-M	EU./WHITE						
53	58	GRAY SHALE &	TIMESTONE						
58	62	GILH SHALL							
		Laboration .							
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was ☑ constructed, ☐ reconstructed, or ☐ plugged									
under my jurisdiction and was completed on (mo/day/year)6// and this record is true to the best of my knowledge and belief.  Kansas Water Well Contractor's License No									
under the business name of BLUE . VAUEY OPIULING by (signature) by (signature)									
under th	e busine	ss name of ISLUE Use typewriter or ball point pen	VIGUE C. ORIUI	V and PROTE	by (s	signature)	and sheet the	7	
		Use typewriter or ball point pen o Kansas Department of Health							
Telephone	785-296-	5524. Send one copy to WAT							
http://www.kdheks.gov/waterwell/index.html.									
KSA 82a	-1212								