

County: Atchison Fraction: SE SE SE SW Sec. 24 T. 6 S R. 18 E

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

Owner: Matthew Robey Household

If location corrected, was listed as: \_\_\_\_\_ Location changed to: \_\_\_\_\_

Section-Township-Range: \_\_\_\_\_

Fraction (1/4 calls): NW SE SE SW | SE SE SE SW

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

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

Comments: Fractions changed by entering Lat and Long in both

LEO Web and WWC5 Interactive Mapper

Verification method: Confirmed by LEO Web NAD83 and WWC5 Interactive Map

Initials: RS Date: 08/23/2023

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**

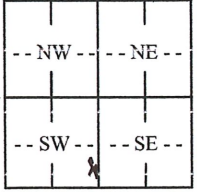
Division of Water Resources App. No.

Well ID

Original Record  Correction  Change in Well Use

**1 LOCATION OF WATER WELL:** County: **ATCHISON** Fraction: NW 1/4 SE 1/4 SE 1/4 SW 1/4 Section Number: **24** Township Number: **T 6 S** Range Number: **R 18 E W**

**2 WELL OWNER:** Last Name: **ROBEY** First: **MATTHEW** Street or Rural Address where well is located (if unknown, distance and direction from nearest town or intersection): If at owner's address, check here:  **THE INTERSECTION OF HWY 159 AND 2254TH ROAD GO 1/2 WEST.**  
 Business Address: **402 DELAWARE STREET**  
 City: **WINCHESTER** State: **KS** ZIP: **66067**

**3 LOCATE WELL WITH "X" IN SECTION BOX:**  
 N  
  
 W E  
 S  
 |-----1 mile-----|

**4 DEPTH OF COMPLETED WELL:** ..... **59** ..... ft.  
 Depth(s) Groundwater Encountered: 1) ..... ft.  
 2) ..... ft. 3) ..... ft., or 4)  Dry Well  
 WELL'S STATIC WATER LEVEL: ..... **30** ..... ft.  
 below land surface, measured on (mo-day-yr) **4/11/2023**  
 above land surface, measured on (mo-day-yr) .....  
 Pump test data: Well water was ..... ft.  
 after ..... hours pumping ..... gpm  
 Well water was ..... ft.  
 after ..... hours pumping ..... gpm  
 Estimated Yield: ..... **15** ..... gpm  
 Bore Hole Diameter: ..... **10** ..... in. to ..... **61** ..... ft. and  
 ..... in. to ..... ft.

**5 Latitude:** ..... **39-30-27.30N** ..... (decimal degrees)  
**Longitude:** ..... **95-21-23.90W** ..... (decimal degrees)  
 Horizontal Datum:  WGS 84  NAD 83  NAD 27  
 Source for Latitude/Longitude:  
 GPS (unit make/model: **GPS MINI**)  
 (WAAS enabled?  Yes  No)  
 Land Survey  Topographic Map  
 Online Mapper: .....

**6 Elevation:** ..... ft.  Ground Level  TOC  
 Source:  Land Survey  GPS  Topographic Map  
 Other .....

**7 WELL WATER TO BE USED AS:**

1. Domestic: <input checked="" type="checkbox"/> Household <input type="checkbox"/> Lawn & Garden <input type="checkbox"/> Livestock	2. <input type="checkbox"/> Irrigation	3. <input type="checkbox"/> Feedlot	4. <input type="checkbox"/> Industrial	5. <input type="checkbox"/> Public Water Supply: well ID .....	6. <input type="checkbox"/> Dewatering: how many wells? .....	7. <input type="checkbox"/> Aquifer Recharge: well ID .....	8. <input type="checkbox"/> Monitoring: well ID .....	9. Environmental Remediation: well ID .....	10. <input type="checkbox"/> Oil Field Water Supply: lease .....	11. Test Hole: well ID .....	12. Geothermal: how many bores? .....	13. <input type="checkbox"/> Other (specify): .....
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**Was a chemical/bacteriological sample submitted to KDHE?**  Yes  No If yes, date sample was submitted: .....

Water well disinfected?  Yes  No

**8 TYPE OF CASING USED:**  Steel  PVC  Other ..... CASING JOINTS:  Glued  Clamped  Welded  Threaded  
 Casing diameter ..... **5** ..... in. to ..... **39** ..... ft., Diameter ..... in. to ..... ft., Diameter ..... in. to ..... ft.  
 Casing height above land surface ..... **18** ..... in. Weight ..... **2.8** ..... lbs./ft. Wall thickness or gauge No. **265** .....

**TYPE OF SCREEN OR PERFORATION MATERIAL:**  
 Steel  Stainless Steel  Fiberglass  PVC  Other (Specify) .....  
 Brass  Galvanized Steel  Concrete tile  None used (open hole)

**SCREEN OR PERFORATION OPENINGS ARE:**  
 Continuous Slot  Mill Slot  Gauze Wrapped  Torch Cut  Drilled Holes  Other (Specify) .....  
 Louvered Shutter  Key Punched  Wire Wrapped  Saw Cut  None (Open Hole)

**SCREEN-PERFORATED INTERVALS:** From **39** ..... ft. to **59** ..... ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.  
**GRAVEL PACK INTERVALS:** From **30** ..... ft. to **59** ..... ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.

**9 GROUT MATERIAL:**  Neat cement  Cement grout  Bentonite  Other .....

Grout Intervals: From **5** ..... ft. to **30** ..... ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.

**Nearest source of possible contamination:**  
 Septic Tank  Lateral Lines  Pit Privy  Livestock Pens  Insecticide Storage  
 Sewer Lines  Cess Pool  Sewage Lagoon  Fuel Storage  Abandoned Water Well  
 Watertight Sewer Lines  Seepage Pit  Feedyard  Fertilizer Storage  Oil Well/Gas Well  
 Other (Specify) **WATER WELL** .....

Direction from well? **SOUTH** ..... Distance from well? **30** ..... ft.

10 FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
0	2	BROWN TOPSOIL			
2	18	TAN & YELLOW CLAY			
18	24	SAND (YELLOW/FINE)			
24	37	BLUE CLAY			
37	49	SAND (YELLOW/FINE)			
49	61	BLUE CLAY & FINE YELLOW SAND			
Notes:					

**11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:** This water well was  constructed,  reconstructed, or  plugged under my jurisdiction and was completed on (mo-day-year) **4/11/2023** ..... and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **518** ..... This Water Well Record was completed on (mo-day-year) ..... under the business name of **BLUE VALLEY DRILLING** ..... Signature *[Signature]*