

CORRECTION(S) TO WATER WELL RECORD (WWC-5)

(to rectify lacking or incorrect information)

County: Atchison

Location listed as:

Section-Township-Range: 6-19-6EFraction ($\frac{1}{4}$ $\frac{1}{4}$ $\frac{1}{4}$): SW NE NW

Location changed to:

6-65-19ESW NE NW

Other changes: Initial statements: _____

Changed to: _____

Comments: _____

verification method: Atchison Co. map from the City of Atchisoninitials: EP date: 6/5/2006

submitted by: Kansas Geological Survey, Data Resources Library, 1930 Constant Ave., Lawrence, KS 66047-3726

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.

1 LOCATION OF WATER WELL: County: ATchison	Fraction SW ¼ NE ¼ NW ¼	Section Number 6	Township Number T 19 S	Range Number R 6E E/W
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Distance and direction from nearest town or city street address of well if located within city?
3½ miles west of ATchison

Global Positioning Systems (decimal degrees, min. of 4 digits)
Latitude: _____
Longitude: _____
Elevation: _____
Datum: _____
Data Collection Method: _____

2 WATER WELL OWNER: **Bob Strong**
RR#, St. Address, Box # : **113 S. 8th St**
City, State, ZIP Code : **Atchison, Ks. 66002**

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: N <table border="1" style="width: 100%; text-align: center; border-collapse: collapse;"><tr><td> </td><td>X</td><td> </td></tr><tr><td>--NW--</td><td>--NE--</td><td> </td></tr><tr><td>W</td><td> </td><td>E</td></tr><tr><td> </td><td>--SW--</td><td>--SE--</td></tr><tr><td> </td><td>S</td><td> </td></tr></table>		X		--NW--	--NE--		W		E		--SW--	--SE--		S		4 DEPTH OF COMPLETED WELL 100 ft. Depth(s) Groundwater Encountered (1)..... ft. (2)..... ft. (3)..... ft. WELL'S STATIC WATER LEVEL..... 33 ft. below land surface measured on mo/day/yr..... 4-5-06 . Pump test data: Well water was.....ft. after..... hours pumping..... gpm Est. Yield... 100 ...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 Domestic 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 .. X; If yes, mo/day/yr Sample was submitted..... Water well disinfected? Yes X No
	X															
--NW--	--NE--															
W		E														
	--SW--	--SE--														
	S															

5 TYPE OF CASING USED: 5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued **X**..... Clamped.....
1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded.....
2 PVC 4 ABS 7 Fiberglass Threaded.....

Blank casing diameter **5**..... in. to ft., Diameter. in. to ft., Diameter in. to ft.
Casing height above land surface..... **24** in., Weight..... **2.82**..... lbs./ft. Wall thickness or gauge No. **258**.....

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..... **75**..... ft. to **85**..... ft., From ft. to ft.
From..... ft. to ft., From ft. to ft.

GRAVEL PACK INTERVALS: From..... **20**..... ft. to **100**..... ft., From ft. to ft.
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 **20**..... 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
2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 14 Abandoned water well below
3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer Storage 15 Oil well/gas well **pond**.....

Direction from well? **north**..... How many feet? **50**.....

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	2	top soil	74	80	finesand grey/smpea, med med
2	24	silty brown clay			pea, pea 3/8, chert
24	33	tan clay	80	85	c.sand grey 3/8 chert
33	37	blue clay	85	94	grey clay
37	42	clay blue tan sandy	94	100	grey shale
42	49	very fine sand brown w/clay			
49	57	fine sand brown w/clay tan			
57	61	fine/coursesand brown/grey			
61	70	fine/course sand brown grey			mix/clay grey
70	74	course sand brown small pea			med pea 3/8

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) **4-5-06**..... and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **182**..... This Water Well Record was completed on (mo/day/year) **5-11-06**..... under the business name of **Strader Drilling Co., Inc.** by (signature) *Jim Strader*

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.kdhe.state.ks.us/geo/waterwells>.