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

(to rectify lacking or incorrect information)

	County:
Location listed as:	Location changed to:
Section-Township-Range: None Given	34-95-12E
Fraction (1/4 1/4 1/4): NE SW NE	34-95-12E SW NE SW NE
Other changes: Initial statements:	·
Changed to:	
Comments:	
verification method: Latitude & longitude, KG	S'"LEO" conversion tool,
verification method: Latitude & longitude, KG well owner's address, area road	1 map, and mapping tool &
aerial photo on KGS website.	initials: DRL date: 10/23/2009
submitted by: Kansas Geological Survey, Data Resources Library, 1930 Co	,

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.

WATE	R WELL	RECORD	Form WWC-	-5	Division of	f Water Resources; A	.pp. No.∟	
	ATION O	F WATER WELL:	Fraction NE 1/4 SW 1/4	124	Section Num	1	Number S	Range Number R E/W
Dista	nce and dir	ection from nearest town or c	ity street address of w	ell if (Global Position	oning Systems (de	cimal deg	rees, min. of 4 digits)
l .	ed within c		owner's addre	55	Latitude: _	39.226	25	
2 WA	TER WEI	LOWNER: Date V and	<u> </u>			96.059	70	
RR#	St. Addre	LOWNER: Don Kent ss, Box # : 5330 Sc	nedy			1192		74874
City.	State, ZIP	Code : S m	ammner CT.		Datum:	665 89	-,1	
		57 111cm	1)	100	Data Collec	tion Method: h	and h	e1d
l .	ATE WEI	LL'S 4 DEPTH OF COM	PLETED WELL	132	• • • • • • • • • • • • • • • • • • • •	It.		
I	ATION	B 1() G	T (1)		6 (2)	- 0	(2)	
I	H AN "X"		r Encountered (1)	 .	ft. (2)	It.	(3)	It.
SEC	TION BOX	WELL'S STATIC W.	ATER LEVEL	nr.	below land st	urface measured or	i mo/day/	/yr
	N	Pump test dat	a: Well water was m: Well water was		tt. atter	nours pu	imping	gpm
		Est. Yieldgpi	m: Well water was		it. arter	nours pu	imping.	gpm
NV	V - XIE -	- WELL WATER TO I	BE USED AS: 5 Publ					
w		E 1 Domestic 3 Fe	descript 7 Demost	water su	pply 9	Dewatering Manitaning	201	To (Specify below)
		2 Irrigation 4 In	dustrial 7 Domesti	ic (lawii o	e garden) 10	Monitoring wen		5.05.04.30.W.C.C
SW	V SE -	- Was a shamisal/hasta	riological sample subr	nittad ta I	Danartmant?	Vos No	~ .	If was maday/was
			dd.					
		Sample was submitted	u	. wate	r wen disinte	cted? Tes	NO .CX	····
	S							
		ING USED: 5 Wrought	Iron 8 Conc	rete tile	CA	ASING JOINTS: (Glued	Clamped
		3 RMP (SR) 6 Asbestos	s-Cement Other	specify	below)	ď	Velded >	
2	PVC	4 ABS 7 Fiberglas eter 15 in. to 155	SS	H.D.K.	<i>:::</i> :		Threaded	
Blank ca	ising diame	eter in. to	ft., Diameter	i	n. to	ft., Diameter		in. toft.
		e land surface60			lbs./ft. Wa	all thickness or gua	ge No	"20K"IT"
TYPE O	F SCREE	N OR PERFORATION MAT						
1 :	Steel	3 Stainless Steel 5 Fibe	erglass 7 PVC	9 A	ABS	11 Other (S	Specify)	
	Brass	4 Galvanized Steal 6 Con		(10 A)	Asbestos-Cen	ent 12 None us	ed (open	hole)
		FORATION OPENINGS AR	B:	_				
1	Continuous	s slot 3 Mill slot 5 G	Gauzed wrapped 71	oreli cut	9 Drilled	holes 11 Non	e (open h	ole)
2	Louvered s	hutter 4 Key punched 6 V	Wire wrapped 8 S	Saw cut	10 Other (s	pecify)		
SCREE	N-PERFOR	RATED INTERVALS: From	ft. to .		ft., Fro	om	. ft. to	ft.
		From	ft. to .		ft., Fro	om	ft. to	ft.
	GRAVEL	PACK INTERVALS: From						
		From	ft. to .		ft., Fr	om	It. to	ft.
6 CPO	TIT MATI	ERIAL: 1 Neat cement 2	Coment grout 369	ntonije	1 Other			
Crout In	UI MAII	From\9.5 ft. to	f From	mome	ft to	ft From		ft to ft
Grout In		source of possible contamina			11. 10	11., 1 10111		11. 10
	Septic tank			10 Livesto	ock nens	13 Insecticide stora	age	1 Other (specify
	Sewer line			11 Fuel st		14 Abandoned wa		below)
1		sewer lines 6 Seepage pit			_	15 Oil well/gas we		House
1	_	1? Mox & Seepage pit			y feet?			7.50
FROM	TO	LITHOLOGI		FROM			NG INT	ERVALS
	6	_	C LOG	TROM	10	TECOOI	110 1111	LICVILLO
08 79 68	80,70	_So.1	CONTRACTOR OF THE STATE OF THE					
\ <u>\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\</u>	70	Limestone				7 190	_	
19	60	1-chow Shal-	****	-		7 - 1 / 20	<u>, </u>	
68_	125	Grey Shalz				7-180		
128	138	Limistona	· · · · · · · · · · · · · · · · · · ·			1-165		
138	195	All-Shalor						
				-				
				+	, ander	1		
				600	Aner 1			
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) . 7/10/08 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 ASSOCIATED DETUGATE THE by (signature) 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								
INSTRUC	CTIONS: Us	se typewriter or ball point pen. <u>PLE</u> Department of Health and Environm	ASE PRESS FIRMLY and I	PRINT clear	ly. Please fill in	on St. Suita 420 Torre	ircle the co	orrect answers. Send top
785-296-5	es to Kansas 5522. Seno	Department of Health and Environm one to WATER WELL OW	NER and retain one for	ogy section, or your re	cords. Fee	of \$5.00 for each	constructe	d well. Visit us at
1		/waterwell/index.html.		, , , , , , , , , , , , , , , , , , , ,				