

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

County: Ottawa

Location listed as:

Location changed to:

Section-Township-Range: None Given

17-12 S-1 W

Fraction (1/4 1/4 1/4): _____

NW NW NW

Other changes: Initial statements: _____

Changed to: _____

Comments: _____

verification method: Well address, area road map, mapping tool
on KGS website, and property listings on Ottawa County
Appraiser's website. initials: DRF date: 6/12/2007

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: <u>OTTAWA</u>	Fraction $\frac{1}{4}$ $\frac{1}{4}$ $\frac{1}{4}$	Section Number	Township Number T S	Range Number R E/W
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Distance and direction from nearest town or city street address of well if located within city? 250 DOVE RD NILES, KS

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

2 WATER WELL OWNER: BRENWEMAN INC.
 RR#, St. Address, Box # : 8256 HUMBARGER RD.
 City, State, ZIP Code : SOLOMAN, KS.

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:

N

--NW--	--NE--		
--SW--	--SE--		

S

4 DEPTH OF COMPLETED WELL 33 ft.

Depth(s) Groundwater Encountered (1)..... 4 ft. (2)..... ft. (3)..... ft.
 WELL'S STATIC WATER LEVEL..... 4 ft. below land surface measured on mo/day/yr 5-03-07
 Pump test data: Well water was..... ft. after..... hours pumping..... gpm
 Est. Yield... 3 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 ; If yes, mo/day/yr Sample was submitted..... Water well disinfected? Yes No

5 TYPE OF CASING USED: 5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued..... 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 13 ft., Diameter in. to ft., Diameter in. to ft.
 Casing height above land surface..... 16 in., Weight..... 160 lbs./ft. Wall thickness or gauge No. SDP26

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 Guazed 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..... 13 ft. to 33 ft., From ft. to ft.
 From..... ft. to ft., From ft. to ft.
GRAVEL PACK INTERVALS: From..... 12 ft. to 33 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 12 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? OPEN PATHEE NONE APPEAR

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
<u>0</u>	<u>12</u>	<u>CLAY TAN SILTY</u>			
<u>12</u>	<u>33</u>	<u>CLAY AND SHALE GRAY</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) 5-03-07 and this record is true to the best of my knowledge and belief.
 Kansas Water Well Contractor's License No. 348 This Water Well Record was completed on (mo/day/year)
 under the business name of PESTINGER PUMP OIL by (signature) Paul Pestinger

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>.