

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

(to rectify lacking or incorrect information)

County: Russell

Location listed as:

Location ~~changed to~~:

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

31-135-15W

Fraction (  $\frac{1}{4}$   $\frac{1}{4}$   $\frac{1}{4}$ ): \_\_\_\_\_

NW NE NE

Other changes: Initial statements: Ellis County

Changed to: Russell County

Comments: \_\_\_\_\_

verification method: Written & legal descriptions, and

Gorham 1:24,000 topo. map.

initials: DRL date: 10/27/2004

1 LOCATION OF WATER WELL: County: <b>Ellis</b>	Fraction <b>NW 1/4 NE 1/4 NE 1/4</b>	Section Number <b>31</b>	Township Number <b>T 13 S</b>	Range Number <b>R 15 E/W</b>
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Distance and direction from nearest town or city street address of well if located within city?  
**Gorham, Kansas - In town**

2 WATER WELL OWNER: **Charlie Cockrell**  
 RR#, St. Address, Box # : **85 Joliet St**  
 City, State, ZIP Code : **Gorham, KS 67640**  
 Board of Agriculture, Division of Water Resources  
 Application Number:

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4 DEPTH OF COMPLETED WELL <b>40</b> ft. ELEVATION: .....
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Depth(s) Groundwater Encountered **15 13** ft. 2 ..... ft. 3 ..... ft.

WELL'S STATIC WATER LEVEL **15** ft. below land surface measured on **9/13/04** mo/day/yr

Pump test data: Well water was ..... ft. after ..... hours pumping ..... gpr

Est. Yield **4** gpm: Well water was ..... ft. after ..... hours pumping ..... gpr

WELL WATER TO BE USED AS: **7** 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/yrs sample was submitted  
 Water Well Disinfected? Yes **X** No

5 TYPE OF BLANK CASING USED/7 2 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 **10** ft., Dia ..... in. to ..... ft., Dia ..... in. to ..... ft.  
 Casing height above land surface **24** in., weight **2.91** lbs./ft. Wall thickness or gauge No. **.21**

TYPE OF SCREEN OR PERFORATION MATERIAL: **7** 7 PVC 10 Asbestos-Cement  
 1 Steel 3 Stainless Steel 5 Fiberglass 8 RMP (SR) 11 Other (Specify) .....  
 2 Brass 4 Galvanized Steel 6 Concrete tile 9 ABS 12 None used (open hole)

SCREEN OR PERFORATION OPENINGS ARE: **8** 5 Gauzed wrapped 8 Saw cut 11 None (open hole)  
 1 Continuous slot 3 Mill slot 6 Wire wrapped 9 Drilled holes  
 2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify) .....

SCREEN-PERFORATED INTERVALS: From **10** ft. to **40** ft., From ..... ft. to ..... ft.  
 From ..... ft. to ..... ft., From ..... ft. to ..... ft.  
 GRAVEL PACK INTERVALS: From **40** ft. to **10** ft., From ..... ft. to ..... ft.  
 From ..... ft. to ..... ft., From ..... ft. to ..... ft.

6 GROUT MATERIAL: **3** 1 Neat cement 2 Cement grout 3 Bentonite 4 Other .....

Grout Intervals: From **0** ft. to **10** 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 14 Abandoned water well  
 2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 15 Oil well/Gas well  
 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer storage 16 Other (specify below)  
 13 Insecticide storage .....

Direction from well? How many feet?

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	5	Topsoil			
5	13	Clay			
13	15	Sand			
15	35	Weathered shale			
35	40	Black shale			

RECEIVED  
 OCT 07 2004  
 BUREAU OF WATER

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) **9/13/04** and this record is true to the best of my knowledge and belief, Kansas Water Well Contractor's Licence No **199** This Water Well Record was completed on (mo/day/yr) **9/30/04** under the business name of **Karst Water Well Drilling & Service, Inc.** by (signature) *Mel Karst*

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.