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

Location listed as:	County: E//is Location changed to:
Section-Township-Range: None Given	29-135-18W
Fraction (1/4 1/4 1/4):	SW SW SE
Other changes: Initial statements:	
Changed to:	
Comments:	
verification method: <u>Well owner's address</u>	
Hays North 1:24,000 top	00. mapinitials: OR4 date: 7/8/2004
submitted by: Kansas Geological Survey, Data Resources Library, 1930 (

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.

WA	TER WELL RECO	ORD Form WWC-5	KSA 82a	-1212 ID No	0			
1 LOCATION OF WATER WELL:	Fraction			ction Number	Township Number	Range Number		
County: Ellis	1/4	1/4	1/4		Т	R E/W		
Distance and direction from nearest to			 					
	,							
2 WATER WELL OWNER: Don F	Forsshore	<u> </u>						
	Thunder				Board of Agricultu	re, Division of Water Resources		
City, State, ZIP Code : Haus					Application Number	-		
3 LOCATE WELL'S LOCATION WITH	A DEBTH OF CO	MDI ETED WELL	~ 5.	# ELEVA	TION.	<u></u>		
AN "X" IN SECTION BOX:	Postb(s) Crouse	huster Faceuratered	. 34		n 1011.	ft. 3 ft.		
N	WELL'S STATIC	WATER LEVEL 34	ft be	low land surfac	e measured on mo/dav/vi	6-6-04		
	Pump test data: Well water was ft. after hours pumping gpm							
NW NE	Fst Yield #O gpm: Well water was ft. after							
- 1444 - - 145 -	WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well							
w !	1 Domestic 2 Irrigation		Oil field water			12 Other (Specify below)		
· · · · · · · · · · · · · · · · · · ·	Z imgation	4 maganar 7	Domestic (ia	wir a garacii,	To Montoning won			
sw se								
5vv 5E	Was a chemical/ mitted	bacteriological sample	submitted to		res No; If yeater Well Disinfected? Yes	es, mo/day/yrs sample was sub- s No		
	millea			VV	ater well disinlected? Tes	, 140		
S								
5 TYPE OF BLANK CASING USED:		5 Wrought iron	8 Conci			Glued Clamped		
1 Steel 3 RMP (SI	,	6 Asbestos-Cement		(specify below		Welded Threaded		
2 PVC 4 ABS Blank casing diameter		7 Fiberglass						
Cooler beint above land auface	In. to 	π., Dia		In. to	II., Dia	guage No. 5.D.k.26		
Casing height above land surface		in., weight	7 P\ 7 P					
TYPE OF SCREEN OR PERFORATION 1 Steel 3 Stainless		5 Fiberglass		MP (SR)	10 Asbestos- 11 Other (Spe	ecify)		
2 Brass 4 Galvaniz		6 Concrete tile	9 AI		12 None used			
SCREEN OR PERFORATION OPENIN	ICC ARE	E Cuo	zed wrapped	,	8 Saw cut	11 None (open hole)		
	NGS ARE. Mill slot		zeu wrappeu e wrapped	•	9 Drilled holes	11 None (open noie)		
	ey punched	7 Toro				ft.		
SCREEN-PERFORATED INTERVALS		5 # 10	35	# From		ft. toft.		
SOREEN-PERFORATED INTERVALS:	From	ft. to		ft., From		ft. toft.		
GRAVEL PACK INTERVALS	: From 5 5	ft. to	.,.30	ft., From	1	ft. toft.		
	From	ft. to		ft., From		ft. toft.		
C ODOUT MATERIAL 4 M		0.0			1 Other			
<u> </u>	t cement	2 Cement grout	•			ft. toft.		
Grout Intervals: From	_	π., From	II.			14 Abandoned water well		
	-	7 84 - 4 -	_	10 Livest				
	ral lines	7 Pit privy		11 Fuels		15 Oil well/Gas well 16 Other (specify below)		
	2 Sewer lines 5 Cess pool 8 Sewage lagoon				•	Other (specify below)		
	page pit	9 Feedya	ra		ticide storage			
Direction from well? 75' we		1.00	50014	How man		O INTERVALO		
FROM TO	LITHOLOGIC	LOG	FROM	то	PLUGGIN	G INTERVALS		
O a Top so	ـــــــــــــــــــــــــــــــــــــ							
2 30 Clay				-		44.40		
30 45 Chyla	sand				141			
30 45 Chy 4 45 Sà Sand 52 55 Shale								
52 55 Shale								
			_					
				ļ		· · · · · · · · · · · · · · · · · · ·		
CONTRACTOR'S OR LANDOWNE	R'S CERTIFICAT	ION: This water well v	vas (1) const	ructed, (2) reco	onstructed, or (3) plugged	under my jurisdiction and was		
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)								
Water Well Contractor's Licence No4.7.8								
under the business name of	netillih	br [1611.			signature	A December 1		
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 transas 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								
and Environment, Bureau of Water, Geology Se	ction, 1000 SW Jacksor	n St., Suite 420, Topeka, Kans	as 66612-1367 T	elephone 785-296-5	522. Send one to WATER WELL	JWNER and retain one for your		

records. Fee of \$5.00 for each constructed well.