

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

County: Saline

Location listed as:

Location ~~changed to:~~

Section-Township-Range: _____

7-13 S-2 W

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

NW NW SW

Other changes: Initial statements: Ottawa County

Changed to: Saline County

Comments: _____

verification method: Legal description, other wells for same owner nearby, and mapping tool on KGS website.

initials: DR date: 8/18/2010

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: OTTAWA Fraction NW 1/4 NW 1/4 SW 1/4 Section Number 7 Township Number T 13 S Range Number R 2 E

Distance and direction from nearest town or city street address of well if located within city? **Global Positioning Systems** (decimal degrees, min. of 4 digits)
 Latitude: _____ Longitude: _____
 Elevation: _____ Datum: _____
 Data Collection Method: _____

2 WATER WELL OWNER: Ottawa County Rural Water Dist #2
 RR#, St. Address, Box # : 4744 West Pleasant Hill
 City, State, ZIP Code : Salina, KS 67401

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

	NW	NE	
W	X		E
	SW	SE	
	S		

4 DEPTH OF COMPLETED WELL 145 ft.
 Borehole Diameter 16 inch to 105 ft 10 inch from 105 ft to 145 ft
 Depth(s) Groundwater Encountered (1) _____ ft. (2) _____ ft. (3) _____ ft.
 WELL'S STATIC WATER LEVEL 8.3 ft. below land surface measured on 5/22/2010
 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: 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 will be submitted _____ Water well disinfected? Yes X No _____

5 TYPE OF CASING USED: 5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued _____ Bolted X
1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded _____
2 PVC 4 ABS 7 Fiberglass _____ Threaded X - 6 inch
 Blank casing diameter 1.0 steel in. to 20 ft., Diameter 10 PVC in. to 105 ft., Diameter 6 in. to 120 ft.
 Casing height above land surface 24 in., Weight _____ lbs./ft. Wall thickness or gauge No. SCH40
 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 slit 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 120 ft. to 145 ft., From _____ ft. to _____ ft.
 From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 GRAVEL PACK INTERVALS: From open hole to _____ ft., From _____ ft. to _____ ft.
 From completion to _____ ft., From _____ ft. to _____ ft.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other _____
 Grout Intervals: (1) From 0 ft. to 20 ft. (2) From 20 ft. to 105 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 ~~Food~~ Food and water well below
 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer storage 15 Oil well/gas well _____
 Direction from well? SOUTH How many feet? ~300

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	4	Soil			
4	6	Clay			
6	9	Sandstone, shale, Clay			
9	14	Clay			
14	19.5	Sandstone with clay streaks			
19.5	20.5	Shale			
20.5	34	Clay			
34	36	Shale			
36	145	Sandstone, H ₂ O			

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) 5/22/2010 and this record is true to the best of my knowledge and belief.
 Kansas Water Well Contractor's License No. 760 This Water Well Record was completed on (mo/day/year) 7-6-2010 7:29 PM
 under the business name of Associated Drilling Pwll by (signature) [Signature] REMOVED

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.kdheks.gov/waterwell/index.html>.