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

` ,	County: Elic
Location listed as:	Location changed to:
Section-Township-Range: NA	8 713 RBO()
Fraction (¼ ¼ ¼):	NE NO NE
Other changes: Initial statements:	
Changed to:	
Comments:	
verification method: Ellis co muneration many directions	given by driller
	initials: <u>JB</u> date: <u>8-16-04</u>

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 KSA 82a-1212 ID No. TW-3A-04											
1 LOCAT	ION OF WA	TER WELL:	Fraction				tion Numbe	r Town	nship Number	Rang	je Number	
County:	Ellis		N64	NW 1/4	NE	4		T	S	R	E/W	
Distance ar			wn or city street		ell if located	within city?						
	50 .	South	of we	// #3								
2 WATER	WELL OW	NER: Cit	of Elli	ک'								
 RR#, St. Ac	dress, Box	# : 8/5	Jeffer	rson				Boa	rd of Agriculture,	Division of W	ater Resources	
City, State,			115 Kg	1.71.3	7	1		App	lication Number:			
LOCATE	WELL'S LO	CATION WITH	4 DEPTH OF (COMPLETED	WELL	34.5	ft. ELEV	/ATION:				
	SECTION		Depth(s) Grou	ndwater Enco	ountered	1	50	.ft. 2	ft.	3	, ft.	
	<u> </u>	- 、	WELL'S STATI	C WATER LE	EVEL7	5 ft. belo	w land surf	ace measured	d on mo/day/yr	7/11//0	4	
		X							hours			
	-NW	- NE	WELL WATER			was Public water s			hours	Injection well		
	1	١	1 Domestic			Dil field water		9 Dewate	•	Other (Specif		
w	1	E	2 Irrigation	4 Indus	strial 7 [Domestic (law	vn & garden) 🕼 Monitor	ing well			
		i										
	-sw -	- SE	Was a chemica	al/bacteriolog	ical sample s	submitted to I	Department'	? Yes No	oX; If yes,	mo/day/vrs sa	ample was sub-	
		1	mitted						isinfected Yes	, , , , , , , , , , , , , , , , , , ,	No	
		1										
5 TYPE (DE BLANK (ASING USED:		5 Wrought	iron	8 Concre	ata tila	CASI	ING JOINTS: GIU	ind Cl	amned	
1 Stee		3 RMP (S		6 Asbesto			specify belo				amped	
⊘ PVC	;	4 ABS	•	7 Fiberglas	ss			<u>′</u>				
Blank casir	ng diameter	<i>(</i> 0	in. to	2.0	ft., Dia	30	in. to	34.5	ft., Dia	in. to	oft.	
Casing hei	ght above la	nd surface	Z6	in., wei	ght			lbs./ft. Wal	l thickness or gua	age No		
TYPE OF S	SCREEN OF	R PERFORATIO	N MATERIAL:			⊘ PV			10 Asbestos-Ce			
1 Stee		3 Stainles		5 Fibergla			IP (SR)		11 Other (Speci			
2 Bras		4 Galvani:		6 Concrete	e tile	9 AB	5		12 None used (•		
\sim		RATION OPENII				ed wrapped		8 Saw c		11 None (d	open hole)	
	tinuous slot		Mill slot		7 Torch	wrapped		9 Drilled	rnoles (specify)		ft	
	vered shutte		(ey punched	20		_			ft. 1			
SCHEEN-	PERFORATI	ED INTERVALS	From	<i></i>	ft. to	S.C	π., Fro	m m	π. ۱ ft	io	rt.	
(GRAVEL PA	CK INTERVALS	6: From	2 0	ft. to	34,5	ft., Fro	m	ft. f	to	ft.	
			From		ft. to		ft., Fro	m	ft.	to	ft.	
o o o o o	T AAATEDIA					<u> </u>		4.04				
	IT MATERIA		it cement	2 Ceme		⊘ Bent			m			
				π., ۲	rom	π. τ						
		•	contamination:		7 Dit maion.			estock pens		Abandoned w		
		4 Late			7 Pit privy			-	15	Other (specify		
	er lines	5 Cess r lines 6 Seer	•		8 Sewage	-		tilizer storage	1.	other (specify		
Direction from	•	riines o seep	page pit		9 Feedyard	1		ecticide storaç	ge z.y .y.			
FROM	TO		LITHOLOGIC	2100		FROM	TO	any feet?	PLUGGING	INTERVALO		
	7			LOG		FROIVI	10		FLOGGING	INTERVALS		
<u> </u>	10	7003	1.	11. C	4.4							
10	18	Brown	of Grey	1/4	ay							
18	14.5	ITEO, TO	tine speci	1 1 1	5/0/2	 						
19.5 26. 28.5	26.0	Coarse to	med san	d W/ F/	nes							
20 6	20.5	Coarse		6 FINE	10.00	-						
<u> </u>	33.0	/	b medium,	Frace	tines							
<i>3</i> 3.	29	Grey	Shole									
7												
	ACTOR'S C	R LANDOWNE	R'S CERTIFICA	TION: This v	vater well wa	as (1 <u>) constru</u>	ucted, (2) re	constructed,	or (3) plugged u	nder my jurisd	liction and was	
completed of	on (mo/day/y	ear))/				and this	record is true	to the best of my	knowledge and	d belief. Kansas	
			58/						ay/yr)	76/04		
under the b	usiness nam	le oi La	you Ch	1sten	sen C	ompar	14 by	y (signature)	gussell	W Kede	al J	

INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks, underlike 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 you records. Fee of \$5.00 for each constructed well.