

AMENDED REPORT - LEGAL DESCRIPTION CORRECTED

WATER WELL RECORD Form WWC-5 KSA 82a-1212

LOCATION OF WATER WELL: County: <u>WALLACE</u>	Fraction <u>SE 1/4 SE 1/4 NW 1/4</u>	Section Number <u>27</u>	Township Number <u>T 13 S</u>	Range Number <u>R 40 E</u>
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Distance and direction from nearest town or city street address of well if located within city?

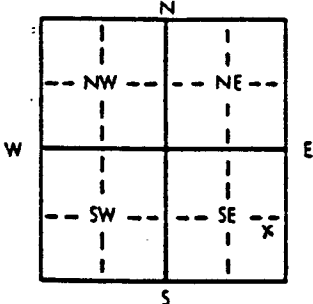
80' W of W edge of Hwy 27 & S of City Park Road in SE corner of City Park, MW-11

WATER WELL OWNER: WALLACE COUNTY COOP - Fred Nowak

#, St. Address, Box #: SOUTH HWY 27
City, State, ZIP Code: Sharon Springs, KS 67758

Board of Agriculture, Division of Water Resources
Application Number:

LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:	DEPTH OF COMPLETED WELL: <u>15</u> ft. ELEVATION:
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Depth(s) Groundwater Encountered 1. 8 ft. 2. _____ ft. 3. _____ ft.

WELL'S STATIC WATER LEVEL 8.25 ft. below land surface measured on mo/day/yr 4/2/95

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

Est. Yield _____ gpm: Well water was _____ ft. after _____ hours pumping _____ gpm

Bore Hole Diameter: 4.25 in. to 1.5 in. and _____ in. to _____ ft.

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
2 Irrigation	4 Industrial	7 Lawn and garden only
		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

TYPE OF BLANK CASING USED:	5 Wrought iron	8 Concrete tile	CASING JOINTS: Glued _____ Clamped _____
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1 Steel	3 RMP (SR)	6 Asbestos-Cement	9 Other (specify below)	Welded _____
2 PVC	4 ABS	7 Fiberglass		<u>Threaded</u>

Blank casing diameter 2 in. to 5 in. Dia. _____ in. to _____ ft. Dia. _____ in. to _____ ft.

Casing height above land surface 0 in., weight _____ lbs./ft. Wall thickness or gauge No. _____

TYPE OF SCREEN OR PERFORATION MATERIAL:	5 Fiberglass	8 RMP (SR)	10 Asbestos-cement
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SCREEN OR PERFORATION OPENINGS ARE:	5 Gauzed wrapped	8 Saw cut	11 None (open hole)
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SCREEN-PERFORATED INTERVALS: From 1.5 ft. to 5 ft. From _____ ft. to _____ ft.

GRAVEL PACK INTERVALS: From 1.5 ft. to 4 ft. From _____ ft. to _____ ft.

GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other _____

Grout intervals: From 4 ft. to 2 ft. From 2 ft. to 1 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 SSW How many feet? 825'

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	5'	Clayey silt, Lt Brown, No odor			
5'	7'	Sandy silt, Brown, No odor			
7'	15'	Clayey silty, Brown, No odor, Wet at 8'			

RECEIVED
JUN 25 1996
BUREAU OF WATER

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) 3/30/95 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 438 This Water Well Record was completed on (mo/day/yr) 4/10/95 under the business name of Kansas City Testing Labs by (signature) [Signature]

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, Topeka, Kansas 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.