

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

(to rectify lacking or incorrect information)

County: Ellis

Location listed as:

Section-Township-Range: 11-185-14

Fraction (  $\frac{1}{4}$   $\frac{1}{4}$   $\frac{1}{4}$ ): SE NW

Location changed to:

11-145-18W

SE NW

Other changes: Initial statements: \_\_\_\_\_

Changed to: \_\_\_\_\_

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

verification method: well address, legal description, position on plat map, and mapping tool on KGS website.

initials: DRL date: 5/12/2006

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 *4*

Division of Water Resources; App. No. XXXXXXXXXX

<b>1 LOCATION OF WATER WELL:</b> County: <b>ELLIS</b>	Fraction $\frac{1}{4}$ SE $\frac{1}{4}$ NW $\frac{1}{4}$	Section Number <b>11</b>	Township Number T <b>19</b> S	Range Number R <b>14</b> E/W
Distance and direction from nearest town or city street address of well if located within city?		<b>Global Positioning Systems</b> (decimal degrees, min. of 4 digits) Latitude: _____ Longitude: _____ Elevation: _____ Datum: _____ Data Collection Method: _____		
<b>2 WATER WELL OWNER:</b> <b>Shaw Builders</b> RR#, St. Address, Box # : <b>382 US Hwy 40</b> City, State, ZIP Code : <b>Ellis, Ks 67137</b>				

<b>3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:</b> N W <table border="1" style="display: inline-table; border-collapse: collapse; text-align: center; width: 80px; height: 80px;"> <tr><td>--NW--</td><td>--NE--</td></tr> <tr><td style="text-align: center;">X</td><td></td></tr> <tr><td>--SW--</td><td>--SE--</td></tr> </table> E S	--NW--	--NE--	X		--SW--	--SE--	<b>4 DEPTH OF COMPLETED WELL</b> ..... <b>60</b> ..... ft.  Depth(s) Groundwater Encountered (1)..... <b>29</b> ..... ft. (2)..... ft. (3)..... ft. WELL'S STATIC WATER LEVEL... <b>29</b> ..... ft. below land surface measured on mo/day/yr..... Pump test data: Well water was.....ft. after..... hours pumping..... gpm Est. Yield... <b>30</b> ...gpm: Well water was.....ft. after..... hours pumping..... gpm WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well <input checked="" type="checkbox"/> 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 <input checked="" type="checkbox"/> .....; If yes, mo/day/yr Sample was submitted..... Water well disinfected? Yes <input checked="" type="checkbox"/> No .....
--NW--	--NE--						
X							
--SW--	--SE--						

<b>5 TYPE OF CASING USED:</b> 1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) <input checked="" type="checkbox"/> PVC 4 ABS 7 Fiberglass	5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued <input checked="" type="checkbox"/> Clamped..... Welded..... Threaded.....	Blank casing diameter ..... <b>4.5</b> in. to ..... ft., Diameter ..... in. to ..... ft., Diameter ..... in. to ..... ft. Casing height above land surface..... <b>18</b> ..... in., weight..... <b>16.2</b> .....lbs./ft. Wall thickness or guage No. <b>S.P.R. 26</b>
TYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel 3 Stainless Steel 5 Fiberglass <input checked="" type="checkbox"/> 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 slot 5. Guazed wrapped 7 Torch cut 9 Drilled holes 11 None (open hole) 2 Louvered shutter 4 Key punched 6 Wire wrapped <input checked="" type="checkbox"/> Saw Cut 8 Saw Cut 10 Other (specify) .....		
SCREEN-PERFORATED INTERVALS: From... <b>60</b> '..... ft. to ... <b>40</b> '..... ft., From ..... ft. to ..... ft. From... <del>60</del> ..... ft. to ..... ft., From ..... ft. to ..... ft.		
GRAVEL PACK INTERVALS: From... <b>60</b> '..... ft. to ... <b>35</b> '..... ft., From ..... ft. to ..... ft. From..... ft. to ..... ft., From ..... ft. to ..... ft.		

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

Grout Intervals: From...~~60~~..... ft. to ...~~50~~..... 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 13 Insecticide Storage 16 Other (specify below)  
2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 14 Abandoned water well  
3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer Storage 15 Oil wll/gas well

Direction from well? ..... **W** ..... How many feet? ..... **50** .....

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	2	TOP SOIL			
2	21	CLAY			
21	23	CLAY w/ FINE SAND			
23	31	FINE SAND			
31	34	MEDIUM SAND			
34	51	MEDIUM + COARSE SAND			
51	55	DARK CLAY			
55	60	SHALE			

**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) ...**4.1.10/06**... and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **478**.... This Water Well Recored was completed on (mo/day/year) ...**4.1.10.06**.... Under the business name of **Plannestial Water Well** 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, 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.