County: <u>Saline</u> Fraction <u>SENE SE SW</u> Sec. 17 T 14 S R 2 EW
CORRECTION(S) TO WATER WELL COMPLETION RECORD (WWC-5)  (to rectify lacking or incorrect information)  Owner: Mark Baxa
Location was listed as: Location changed to:
Section-Township-Range: None Griven 17-145-2 W  Fraction (1/4 1/4 1/4): 5ENE 5E 5W
Other changes: Initial statements:
Changed to:
Comments:
Verification method: Wellsite address, city street map, and mapping tool on KGS website.
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 W	WC-5	Division of	of Water Resources A	pp. No.	
1 LOCATION OF WATER WEI			Section Nun	nber Township I		
County: SALINE	1/4 1/4	1/4 1/4		T	S R DE DW	
Street/Rural Address of Well Loc				ioning System (GI		
from nearest town or intersection: If at owner's address, check here				Latitude: (in decimal degrees)  Longitude: (in decimal degrees)		
625 SEITZ DE.				Elevation: (in decimal degrees)		
	2.0		Datum: 🔲 🔻	WGS 84, 🔲 NAD 8	3, 🔲 NAD 27	
2 WATER WELL OWNER: MARK BAXA				Collection Method:		
RR#, Street Address, Box #: 625 SEITZ DE. City, State, ZIP Code SALINA, KS 67401			☐ GPS unit (Make/Model:) ☐ Digital Map/Photo, ☐ Topographic Map, ☐ Land Survey			
Sign States, 211 South Sign Sign Sign Sign Sign Sign Sign Sign	ALINA, KS W	7401	Est. Accuracy	½: □ <3 m, □ 3-5 r	n, [] 5-15 m, [] >15 m	
3 LOCATE WELL	H OF COMPLETED WELI	. 7	1	C.		
WITH AN "X" IN 4 DEPT SECTION BOX: Depth(s)	Crowndwater Encountered		f	II.	(3) ft	
N WELL'S	Depth(s) Groundwater Encountered (1)					
	Pump test data: Well water was. 3.4ft. after					
EST. YIELDgpm, Well water wasft. after hours pumpinggpr						
W   E   Bore Hol	e Diameter / in. to	<b>.'.</b> ]./	t., and	in. to	ft.	
	VATER TO BE USED AS:	Public wat	er supply	Geothermal	☐ Injection well	
SWSE ☐ Domestic ☐ Feedlot ☐ Oil field water supply ☐ Dewatering ☐ Other (Specify below) ☐ Irrigation ☐ Industrial ☑ Domestic-lawn & garden ☐ Monitoring well						
	emical/bacteriological sample	submitted to	Department?	☐ Yes 「X N	0	
Was a chemical/bacteriological sample submitted to Department? Yes No  If yes, mo/day/yr sample was submitted						
1 mile  Water well disinfected? Yes No						
5 TYPE OF CASING USED:	Steel YPVC C	Other		*************		
CASING JOINTS: 🗹 Glued [	☐ Clamped ☐ Welded	☐ Threaded	1			
CASING JOINTS: A Glued Clamped Welded Threaded Casing diameter in. to ft., Diameter in. to ft., Diameter in. to ft. Casing height above land surface in., Weight Le.C. lbs./ft., Wall thickness or gauge No. 100. 100.						
Casing height above land surface TYPE OF SCREEN OR PERFORA		<i>J.</i>	lbs./ft., W	all thickness or gat	ige No	
Steel Stainless Steel		Г	Other (Specify	)	< ************************************	
Brass Galvanized Ste	eel None used (open he	ole)	(	,		
SCREEN OR PERFORATION OP	ENINGS ARE:	<b>~</b> ] m 1 .		1 - F-131 /	11\	
Continuous slot Mill slo	ot, 035 Gauze wrapped Gunched Wire wrapped	Torch cut	Drilled ho	les [] None (op-	en noie)	
Louvered shutter Key punched Wire wrapped Saw cut Other (specify)  SCREEN-PERFORATED INTERVALS: From ft. to ft., From ft. to ft.						
From						
GRAVEL PACK INTERVALS: From						
From						
	eat cement Gement grout ft. to \$\square\$ 5 ft., From					
What is the nearest source of possib		1	11. 10	10, 110, 110, 111, 111, 111, 111, 1	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Septic tank Lateral lines Pit privy Livestock pens Insecticide storage Other (specify below)						
Sewer lines Cesspool Sewage lagoon Fuel storage Abandoned water well  Watertight sewer lines Seepage pit Feedyard Fertilizer storage Oil well/gas well						
Direction from well PORT.	eepage pit reedyard					
	HOLOGIC LOG	FROM	TO LIT	HO. LOG (cont.) o	r PLUGGING INTERVALS	
	<i>F</i>					
3 18 CLAY TA						
	y JILTY TAN					
	E YCEEK GRAUE	L Beor	010			
71 SHALL 6	reay					
	4 ,					
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was ★ constructed, □ reconstructed, or □ plugged						
under my jurisdiction and was completed on (mo/day/year) 2						
Kansas Water Well Contractor's License No. 33.7 This Water Well Record was completed on (mo/day/year)						
under the business name of Ph. S.T. 1. D. C.C. Ph. M.P. St. Queen. by (signature). Co. A. J. C. S.						
(white, blue, pink) to Kansas Department	of Health and Environment, Bureau	of Water, Geo	logy Section, 100	0 SW Jackson St., Suit	te 420, Topeka, Kansas 66612-1367.	
Telephone 785-296-5524. Send one copy to WATER WELL OWNER and retain one for your records. Include fee of \$5.00 for each constructed well. Visit us at http://www.kdheks.gov/waterwell/index.html.						
KSA 82a-12.12						