County: <u>Saline</u> Fraction NE SW NE NW	Sec. 16 T 14 S R 2 EW
CORRECTION(S) TO WATER WELL COMPL	
Owner: Exline Leasing, Inc.	iformation)
Location was listed as:	Location changed to:
Section-Township-Range:	
Fraction (¼ ¼ ¼):	
Other changes: Initial statements: Lat.: 97.5594	
Long: 38.8392	
Changed to:	
Long: -97,55094	
Comments:	
Verification method: Wellsite address city st	reet map latitude &
Verification method: Wellsite address, city st longitude (corrected), and mapping:	tool & aprial photos on
KGS website.	initials: OPA date: 10/7/2015
Submitted by: Kansas Geological Survey, Data Resources Library, 1930 Cons	stant Ave., Lawrence, KS 66047-3726
to: Kansas Dept of Health & Environment, Bureau of Water, 1000 SW Jackson	

WATER	WELL RE	CORD	Form W	WC-5	D	ivision of Wate	r Resources App. No				
1 LOCA	TION OF WA	TER WELL:	Fraction			ion Number	Township No.	Range Number			
	: Saline	£Wall I castians	NE 1/4 SW 1/4 NE			16 T 14 S R 2 □E □ W					
Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here					Latit	Global Positioning System (GPS) information: Latitude: .97,5594(in decimal degrees)					
3256 East Country Club Road				Long	Longitude: 38.8392(in decimal degrees)						
Salina, KS 67401					Elevation: 1224.2						
2 WATER WELL OWNER:						Datum: ☐ WGS 84, ☐ NAD 83, ☑ NAD 27 Collection Method:					
RR#, Street Address, Box #: \(\frac{1}{2}\sqrt{100}\) \(\tag{7}\sqrt{0}\)						GPS unit (Make/Model:)					
City, State, ZiP Code :					Fee	☐ Digital Map/Photo, ☑ Topographic Map, ☐ Land Survey Est. Accuracy: ☐ <3 m, ☐ 3-5 m, ☑ 5-15 m, ☐ >15 m					
3 LOCAT	3 LOCATE WELL										
	AN "X" IN 4 DEPTH OF COMPLETED WELL 7										
SECTIO	ON BOX: N										
<u></u>	Direct data data. Wall sustanting of the house purpose of										
X X	NE	EST. YIELD	gpm. Well wate	r was	fl	. after	hours pump	ing gpm			
w "	Ε		eter 3in. to .								
	+		TO BE USED AS:					ijection well			
sw-	SE	☐ Domestic ☐ Irrigation		Domestic-la	wn & es	erden 🗆 Mo	mitoring well	ther (Specify below) sction point			
			bacteriological sample	submitted (o Depar	tment?	Yes 🗹 No				
	s _.	lf yes, mo∕	day/yr sample was sul	bmitted	•••••						
	mile——	L	fected? Yes								
		JSED: Steel					****				
CASING.	JOINTS: V	Glued ☐ Clan	nped Welded ft., Diameter	☐ Threade	d In	e n	ismeter	in to ft			
Casing t	height above la	nd surface24	Weight		lbs/	ft., Wall thic	kness or gauge No	SCH.40			
	SCREEN OR	PERFORATION	MATERIAL:			-					
□ St	cel Sta	inless Steel	PVC None used (open h		Other (Specify)		*********			
		ATION OPENING		(OIE)							
□ co	ontinuous slot	Mill slot	Gauze wrapped [Torch cut	☐ Dr	illed holes	None (open hole)			
COPERA	ouvered shutter	Key punched	Wire wrapped [Saw cut	∐ Oī	her (specify)	٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠	A			
SCREEN-PERFORATED INTERVALS: From ft. to ft. from ft. from ft. ft. from ft. ft. ft. ft. ft. ft. ft. ft.											
G	RAVEL PACI	K INTERVALS:	From2	ft. 107		ft., From	ft. to	o ft.			
			From	ft. to		ft., From		o ft.			
Grout Inter	r Materiai	D: Neat ceme	ent Cement group	Bento	nite L	J Other		ft to ft			
		e of possible conta		A	11. 10	************		11. 10 11			
☐ Se	ptic tank	Lateral lin	es 🔲 Pit privy	Livestock		Insecticide		r (specify below)			
	wer lines	☐ Cesspool ines ☐ Scepage p	Sewage Ingoon			☐ Abandoned ☐ Oil well/ga		nium Contam.			
	on from well		п Пессиуми			ell		*******************			
FROM	то	LITHOLOG	IC LOG	FROM	TO	LITHO, LO	OG (cont.) <u>or</u> PLUC	GGING INTERVALS			
0 1	Clay, s										
1 7	Clay, s	ilt, sand									

 				 		FSIP-13-2-	7				
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) .8/19/13 and this record is true to the best of my knowledge and belief.											
Kansas Water Well Contractor's License No. 709 This Water Well Record was completed on (mo/day/year) ,12/30/13											
INSTRUCT	INSTRUCTIONS: Use properties of ball point on PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks and check the correct answers. Send one copy to										
i к.	Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Splite 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										
Telephone 785-296-5524. Send one copy to WATER WELL OWNER and retain one for your records. Include fee of 35.00 for each constitution well. Yish as at http://www.kdheks.gov/waterwell/index.html											