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

Location listed as:	County: <u>Saline</u> Location changed to:
Section-Township-Range: //- /4 5-3 E	11-145-3W
Fraction ( 1/4 1/4 1/4): SE SW NW	SE SE SW NW
Other changes: Initial statements: Latitude: 38, 50	59° Longitude: 97.3736°
Changed to: <u>Latitude</u> : <b>38</b> ° 50′ 59″	Longitude: 97°37'36"
Comments:	
verification method: Wellsite address, city  E KGS' LEO' Conversion tool, an	street map, revised Lat./Long.  d mapping tool on KGS website.  initials: DRY date: 4/7/2011
submitted by: Vancos Gaalagiaal Survey, Data Passaurass Library, 1020 Co	onstant Ava. Laurence VS 66047 2726

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	Division of Water Resources; App. No.	
1 LOCATION OF WATER WELL: Fraction County: Saline SE 1/4 SW 1/4 NV	Section Number Township Number Range Number T 14 S R 3 E	
Distance and direction from nearest town or city street address of we located within city?	Latitude: 38.5059°	
1336 West North Street, Salina	Longitude: 97.3736°	
2 WATER WELL OWNER: Mid Kansas Cooperative	Elevation: TOC: 1221.58; RIM: 1222.07	
RR#, St. Address, Box # : 307 W Cole, P.O Box D	Datum: NAD 1986	
City, State, ZIP Code : Moundridge, KS 67107	Data Collection Method: legal survey	
3 LOCATE WELL'S 4 DEPTH OF COMPLETED WELL 3		
LOCATON	MW3	
WITH AN "X" IN Depth(s) Groundwater Encountered 1	ft. 2 ft. 3 ft.	
SECTION BOX: WELL'S STATIC WATER LEVEL 17	71 ft. below land surface measured on mo/day/yr 1/12/11	
N Pump test data: Well water wa	ft. after hours pumping gpm	
Est. Yield gpin: Well water wa	s ft. after hours pumping gpm	
1 Domestic 3 Feed let 6 Oil field wet	blic water supply 8 Air conditioning 11 Injection well	
W E 2 Irrigation 4 Industrial 7 Domestic (la	er supply 9 Dewatering 12 Other (Specify below) wn & garden) 10 Monitoring well	
	wii & garden) Toyloomoring wen	
Was a chamical/bacterialogical sample su	emitted to Department? Von No. V : If you moldey/year	
S Sample was submitted	omitted to Department? Yes No X; If yes, mo/day/yrs	
	Water Well Disinfected? Yes No X	
5 TYPE OF CASING USED: 5 Wrought Iron 8	Concrete tile CASING JOINTS: Glued Clamped	
1 Steel 3 RMP (SR) 6 Asbestos-Cement 9	Other (specify below) Welded	
(2) PVC 4 ABS 7 Fiberglass	Threaded X	
Blank casing diameter 2 in. to 14 ft., Dia	in. to ft., Dia in. to ft.	
2 PVC 4 ABS 7 Fiberglass Threaded X Blank casing diameter 2 in. to 14 ft., Dia in. to ft., Dia in. to ft. Casing height below land surface 0.49 ft., Weight Ibs./ft. Wall thickness or gauge No.		
TYPE OF SCREEN OR PERFORATION MATERIAL:	0 ADS 11 Other (if-)	
1 Steel 3 Stainless steel 5 Fiberglass 7 PVC 2 Brass 4 Galvanized steel 6 Concrete tile 8 RM (SR)	10 A sheetes-Cement 12 None used (open hole)	
SCREEN OR PERFORATION OPENINGS ARE:	10 Assestos-centent 12 None used (open note)	
1 Continuous slot (3) Mill slot 5 Gauze wrapped	7 Torch cut 9 Drilled holes 11 None (open hole)	
2 Louvered shutter 4 Key punched 6 Wire wrapped	3 Saw Cut 10 Other (specify)	
SCREEN-PERFORATED INTERVALS: From 14 ft	to 24 ft. From ft. to ft.	
From ft	to ft. From ft. to ft.	
GRAVEL PACK INTERVALS: From 12 ft	to 24 ft. From ft. to ft.	
1 Continuous slot 3 Mill slot 5 Gauze wrapped 2 Louvered shutter 4 Key punched 6 Wire wrapped SCREEN-PERFORATED INTERVALS: From 14 ft From ft GRAVEL PACK INTERVALS: From 12 ft From ft	to ft. From ft. to ft.	
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout (	Bentonite (4)Other Concrete: 0-9ft	
Grout Intervals From 9 ft. to 12 ft. From	ft. to ft. From ft. to ft.	
What is the nearest source of possible contamination:		
	Livestock pens 13 Insecticide Storage 16 Other (specify	
2 Sewer lines 5 Cess pool 8 Sewage lagoon (11)		
	Fertilizer storage 15 Oil well/ gas well	
Direction from well? NW Ho	v many feet? ~70ft	
FROM TO LITHOLOGIC LOG	FROM TO PLUGGING INTERVALS	
0 15 Black clay		
15 24 Gray clay		
	Flushmount waiver from BOW	
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)1/11/11 and this record is true to the best of my knowledge and belief.		
Kansas Water Well Contractor's License No. 757 . This Water Well Record was completed on (mo/day/year)		
under the business name of Larsen & Associates, Inc. by (signature)		
INSTRUCTIONS: Please fill in blanks 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. Tel	ephone 785-296-5322 Send one to WATER WELL OWNER and retain one for	
your records. Fee of \$5.00 for each constructed well. Visit us at http://www.kdheks.gov/waterwell.		