County:Saline Fraction SW NE NE SW Sec.	. 36 T /4 S R 3 EW
CORRECTION(S) TO WATER WELL COMPLETION	ON RECORD (WWC-5)
Owner: Collicott	ation)
Location was noted as:	eation changed to:
Section-Township-Range: 36-145-2W	36-145-3W
Section-Township-Range: 36-145-2W Fraction (1/4 1/4 1/4): 5W NE SW	SW NE NE SW
Other changes: Initial statements:	
Changed to:	
Comments:	
Verification method: Written & legal description	ns, area road map,
Verification method: Written & legal description and mapping tool & acrial photo	s on KGS website.
	initials: Okt date: 4/30/20/5
Submitted by: Kansas Geological Survey, Data Resources Library, 1930 Constant to: Kansas Dept of Health & Environment, Bureau of Water, 1000 SW Jackson, Su	Ave., Lawrence, KS 660147-3726 viite 420, Topeka, KS 66612-1367.

WATER WELL F Original Record		Form W			sion of Water urces App. No.		Well ID
1 LOCATION OF V	VATER WEL	L: I	Traction 1	Section Number T		Township Numb	er Range Number
County: (3')	LINE		SWASWANE Y		36	T /4 S	R DE KW
2 WELL OWNER: I Business:			First: OLIN				(if unknown, distance and r's address, check here:
Address: W17				2/1		PENE	,
City: SAL	INA	State: 🗡 🕻	ZIP: 67401	71		CERC	
3 LOCATE WELL WITH "X" IN	4 DEPTH	OF COMP	LETED WELL:	<u> 9</u> ۾	5 Latitud	e:	(decimal degrees)
SECTION BOX:					2011610	ıde:	(decimal degrees)
N	2) WELL'S ST	ft. 3)	ft., or 4)	☐ Dry Well	Datum:	□ WGS 84 □ NAI	
			ER LEVEL: at measured on (mo-day			or Latitude/Longitude (unit make/model:	;)
NW NE			neasured on (mo-day er was 2.5			(WAAS enabled? □	Yes No)
w	after	hours p	umping20	n. . gpm		d Survey Topogra ine Mapper:	aphic Map
SWP SE		Well wat	er was	ft.			
			umping	0.	6 Elevation	o n :ft.	. Ground Level TOC
S	Bore Hole I	Diameter:	9 in. toO9.	ft. and			GPS Topographic Map
7 WELL WATER TO			in. to	ft.		Utner	
1. Domestic:			r Supply: well ID		10. 🔲 Oil I	Field Water Supply: 16	ease
☐ Household	6. □	Dewatering:	how many wells?		Test Ho	le: well ID	
Livestock			harge: well ID well ID			ed Uncased Uncased () or cased	
2. Irrigation	9. E	nvironmental	Remediation: well I	D	a) Clos	ed Loop 🔲 Horizont	tal 🗌 Vertical
3. ☐ Feedlot 4. ☐ Industrial		Air Sparge Recovery	☐ Soil Vapor ☐ Injection	Extraction			scharge Inj. of Water
4. Industrial Recovery Injection 13. Other (specify):							
Water well disinfected	? M V _{es} □	Ño		•			
8 TYPE OF CASING	LUSED: □ S	teel X PVC	☐ Other	CASIN	NG JOINTS:	☑Glued ☐ Clamped	d □ Welded □ Threaded
Casing diameter	surface	 tt., L	Weight	n. to	ft., Diamet	er in. to ess or gauge No (\$. .	se als
Casing height above land surface							
☐ Steel ☐ Stainless Steel ☐ Fiberglass ☐ PVC ☐ Other (Specify)							
SCREEN OR PERFORATION OPENINGS ARE:							
Continuous Slot	Mill Slot	Ø 4.5 □ Gau	ze Wrapped T	orch Cut D	rilled Holes [Other (Specify)	
□ Louvered Shutter □ Key Punched □ Wire Wrapped □ Saw Cut □ None (Open Hole) SCREEN-PERFORATED INTERVALS: From							ft. to ft.
GRAVEL PACK INTERVALS: From							
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other Grout Intervals: From							
Nearest source of possible contamination:							
☐ Septic Tank		Lateral Lines	☐ Pit Privy		Livestock Pens	_	cide Storage
☐ Sewer Lines ☑ Watertight Sewer L	inas 🗔	Cess Pool Seepage Pit	☐ Sewage La ☐ Feedyard		Fuel Storage Fertilizer Stora		oned Water Well ell/Gas Well
Other (Specify)							
Direction from well?	WEST	TTHOLOGI				ITHO LOG (aprt.) or	r PLUGGING INTERVALS
10 FROM TO	FILL DI	LITHOLOGI	C LUG	FROM	TO L	11110. LOG (cont.) 01	I LUUUINU INTERVALS
0 3		BLOWN)				
18 33	CLAY	TAN		2			
31 59	SAND	FINE	TO MED. T	M 2			
	Notes:						
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was a constructed, a reconstructed, or plugged							
under my jurisdiction and was completed on (mo-day-year)							
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was a constructed, or plugged under my jurisdiction and was completed on (mo-day-year) and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No This Water Well Record was completed on (mo-day-year) under the business name of PLST. DELC.							
INSTRUCTIONS: Send one copy to WATER WELL OWNER and retain one copy for your records. Submit fee of \$5.00 for each constructed well along with one (white) copy to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Toneka, Kansas 66612-1367, Telephone (785) 296-3565.							

KSA 82a-1212

Visit us at http://www.kdheks.gov/waterwell/index.html

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