

CORRECTION TO WATER WELL RECORD (WWC-5)

The following correction(s) was made to the attached WWC-5 log, in order to file the item or to rectify lacking or incorrect information.

Fraction (1/4 1/4 1/4) Section-Township-Range changed:

listed as 11-15S-2W

changed to SE NW SW, 11-15S-2W

Other changes: Initial statements:

Changed to:

Comments:

verification method: Written & legal descriptions, position on plat map,
and Salina 1:24,000 topo. map. initials: DRJ date: 4/17/2002

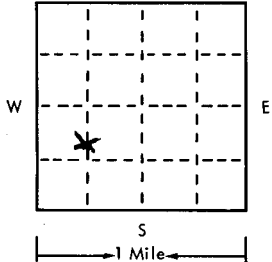
submitted by: Kansas Geological Survey, Data Resources Library, 1930 Constant Ave., Lawrence, KS 66047-3726
to: Kansas Dept of Health & Environment Bureau of Water Industrial Programs, Bldg 283, Forbes Field, KS 66620

USE TYPEWRITER OR BALL
POINT PEN-PRESS FIRMLY,
PRINT CLEARLY.

WATER WELL RECORD
KSA 82a-1201-1215

T R EW sec 1/4 1/4 1/4 No.

Kansas State Dept. Of Health
(Water Well Contractors)
Forbes-Bldg. 740
Topeka, Kansas 66620

1 Location of well:	County Saline	Township name Walnut	Fraction	Section number 11	Town number T-15-S	Range number R-2-W
Distance and direction from nearest town or city: 12 miles SE Salina Street address of well location if in city:			3 Owner of well: R. E. Sprecker Address: 2212 Kensington Salina, Kansas 67401			
Locate with "X" in section below: N  W S E 1 Mile			Sketch map:			4 Well depth: <u>42</u> ft. Date of completion <u>4/28/75</u> Well diameter <u>7</u> in.
2 Type and color of material			From	To	5 <input type="checkbox"/> Cable tool <input checked="" type="checkbox"/> Rotary <input type="checkbox"/> Driven <input type="checkbox"/> Dug <input type="checkbox"/> Hollow rod <input type="checkbox"/> Jetted <input type="checkbox"/> Bored <input type="checkbox"/> Reverse rotary	
			6 Use: <input checked="" type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry <input type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input type="checkbox"/> Commercial <input type="checkbox"/> Test well <input type="checkbox"/>			
			7 Casing: Material <u>RMP</u> Height: above <u>18</u> in. Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <u>18</u> in. Diam. <u>5</u> in. to <u>42</u> ft. depth Weight <u>200</u> lbs./ft. Drive shoe? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
			8 Screen: field perforated Manufacturer _____ Type <u>RMP</u> Dia. <u>5"</u> Slot/gauze <u>12ga</u> Length _____ Set between _____ ft. and _____ ft. Fittings: Gravel pack <input type="checkbox"/> Yes <input type="checkbox"/> No Size range of material _____			
(use a second sheet if needed)			9 Static water level: <u>10</u> ft. below land surface Date <u>4/28/75</u>		10 Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield <u>30</u> g.p.m.	
			11 Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____			
			12 Well head completion: <u>18</u> capped <input type="checkbox"/> Pitless adapter <input type="checkbox"/> Inches above grade			
			13 Well grouted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Depth: From <u>0</u> ft. to <u>10</u> ft.			
16 Remarks: elevation Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley			14 Nearest source of possible contamination: ft. <u>5</u> mile Direction <u>SE</u> Type <u>sewer</u> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		15 Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name _____ Model number _____ HP _____ Volts _____ Length of drop pipe _____ ft. capacity _____ g.p.m. Type: <input type="checkbox"/> Submersible <input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating <input type="checkbox"/> Centrifugal <input type="checkbox"/> Other	
			17 Water well contractor's certification: This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief. Rader Drilling Co. <u>194</u> Business name License No. Address Carlton, Kans. <u>67429</u> Signed Brent E. Rader Date <u>5-11-75</u> Authorized representative			