CORRECTION(S) TO WATER WELL RECORD (WWC-5)

(to rectify lacking or incorrect information)

| Location listed as: | Location changed to: | |
|---|---|--|
| Section-Township-Range: $17 - 16 \pm 175 - 24 \omega$ | 17-165-24W | |
| Fraction (1/4 1/4 1/4):SW SE SW SW | 17-165-24W SE SE SW SW | |
| Other changes: Initial statements: | • | |
| | | |
| Changed to: | | |
| | | |
| Comments: | | |
| | | |
| verification method: Latitude & longitude, KGS "LEO" conversion tool, written description, and mapping tool on KGS website. | | |
| written description, and mapping tool on KGS website. | | |
| | initials: DRL date: 3/9/2012 | |
| submitted by: Kansas Geological Survey, Data Resources Library, 1930 Coto: Kansas Dept of Health & Environment, Bureau of Water, 1000 SW Jack | | |
| to. Ransas Dept of Health & Environment, Bureau of Water, 1999 By the | ason, same 120, repend, 125 00012 1507. | |

| WATER WELL RECORD | Form WWC-5 | Division of Water Resources App. No. |
|--|------------------------------------|---|
| 1 LOCATION OF WATER WELL: County: VESS | Fraction SE14SW 14SW 14 | Section Number Township No. Range Number T/64/7 S RZ \ \ \Bar{\text{LE}} \ \text{W} |
| Street/Rural Address of Well Location | ; if unknown, distance & direction | Global Positioning System (GPS) information: Latitude: 38.39 |
| from nearest town or intersection: If a | | Latitude: (in decimal degrees) |
| In East of Arnold | Imi North+ | Elevation: 25.16 |
| 1/2 East | | |
| 2 WATER WELL OWNER: POS | emary Hinz | Collection Method: |
| 2 WATER WELL OWNER: RR#, Street Address, Box #: City, State, ZIP Code | Box'148 | ☐ Digital Map/Photo, ☐ Topographic Map, ☐ Land Survey |
| North | Newton, KS 67117 | Est. Accuracy: $< 3 \text{ m}$, |
| 3 LOCATE WELL | · | 4 |
| WITH AN "X" IN SECTION BOX: Depth(s) Ground | COMPLETED WELL | t. below land surface measured on mo/day/yr. 21./ |
| N WELL'S STA | TIC WATER LEVEL 72 f | t below land surface measured on mo/day/yr $9 - 19 - 11$ |
| Pum | p test data: Well water was 3.2 | ft. after hours pumping gpm |
| EST. YIELD | 2.8gpm, Well water was. 3.2 | ft. after hours pumping gpm |
| W E Bore Hole Diameter in. toft., andft. | | |
| WELL WATER TO BE USED AS: Public water supply Geothermal Injection well Domestic Feedlot Oil field water supply Dewatering Other (Specify below) | | |
| SW SE Domestic Feedlot Oli field water supply Dewatering Other (Specify below) | | |
| Was a chemical/bacteriological sample submitted to Department? \(\subseteq \) Yes \(\subseteq \) No | | |
| S If yes, mo/day/yr sample was submitted | | |
| | infected? X Yes No | |
| 5 TYPE OF CASING USED: Steel Y PVC Other | | |
| CASING JOINTS: Glued Cla | mped Welded Threade | ed to ft Diameter in to ft |
| Casing height above land surface | 2 4 in. Weight | to |
| TYPE OF SCREEN OR PERFORATION | N MÅTERIAL: | |
| Steel Stainless Steel | PVC | Other (Specify) |
| ☐ Steel ☐ Stainless Steel ☐ Other (Specify) | | |
| Continuous slot Mill slot Gauze wrapped Torch cut Drilled holes None (open hole) | | |
| Louvered shutter Key punched | ☐ Wire wrapped ☐ Saw cut | Other (specify) |
| SCREEN-PERFORATED INTERVALS: From | | |
| GRAVEL PACK INTERVALS: From3.4 ft. to7.4 ft., From ft. to ft. | | |
| From ft. to ft. From ft. to ft. | | |
| 6 GROUT MATERIAL: Neat cen | nent Cement grout Bento | onite Other |
| 6 GROUT MATERIAL: Neat cement Cement grout Bentonite Other | | |
| | lines Pit privy Livestock | |
| Sewer lines Cesspoo | | ge Abandoned water well storage Oil well/gas well |
| ☐ Watertight sewer lines ☐ Seepage Direction from well | | e from well |
| FROM TO LITHOLO | | TO LITHO. LOG (cont.) or PLUGGING INTERVALS |
| 7 3 Topsoil | | |
| | lay | |
| 15 23 Fine san | | |
| | nedium Sand | |
| 72 74 Shale | CHY CONT SC SAINT | |
| | | |
| | | |
| | | |
| 7 CONTRACTOR'S OR LANDOWNE | CR'S CERTIFICATION: This wa | ter well was X constructed, \square reconstructed, or \square plugged |
| under my jurisdiction and was completed on (mo/day/year) 2.7.4 and this record is true to the best of my knowledge and belief, | | |
| Kansas Water Well Contractor's License No. 3.7. This Water Well Record was completed on (mo/day/ygar) | | |
| under the business name of Cuel Wendurk Republic by (signature) by (signature) INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks and check the correct answers. Send three copies | | |
| (white, blue, pink) to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 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-1212 | | |