

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 31-18-21

changed to NE NW NW, 31-18S-21W

Other changes: Initial statements: _____

Changed to: _____

Comments: On SW corner of Lawrence & Washington

verification method: Written & legal descriptions, map from county appraiser, phone call to county appraiser, and Bazine 1:24,000 topo. map initials: DRL date: 6/27/2001

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

Wazine

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 <u>Miss</u>	Township name <u>Bazine</u>	Fraction	Section number <u>31</u> 31-18-24W	Town number <u>18</u>	Range number <u>21</u>
Distance and direction from nearest town or city:				3 Owner of well: <u>ROBEN KLEWENOE</u>		
Street address of well location if in city:				Address: <u>BAZINE KANSAS</u>		
Locate with "X" in section below:			Sketch map:			
			<p><i>on lots 1-2-3 blocks 8 of Chenkel's addn. Bazine, Mo.</i></p>			
2			Type and color of material	From	To	4 Well depth: <u>44</u> ft. Date of completion <u>10-1-75</u> Well diameter <u>5 1/2</u> in.
			<u>TOP 4 LIGHT COLORED CLAY</u>	<u>0</u>	<u>16</u>	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
			<u>GOOD COURSE SAND</u>	<u>16</u>	<u>24</u>	6 Use: <input type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry <input checked="" type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input type="checkbox"/> Commercial <input type="checkbox"/> Test well <input checked="" type="checkbox"/> <u>FOR IAWW</u>
			<u>SOFT TAN SANDY CLAY</u>	<u>24</u>	<u>30</u>	7 Casing: Material <u>PLAST</u> Height: above/below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <u>24</u> in. Diam. <u>250</u> lbs./ft. <u>0</u> in. to <u>34</u> ft. depth Drive shoe? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <u> </u> in. to <u> </u> ft. depth
			<u>GOOD CLEAN SAND</u>	<u>30</u>	<u>38</u>	8 Screen: Manufacturer <u>JESSE & LOWELL</u> Type <u>STYRENE</u> Dia. <u>5"</u> Slot/gauze <u>FINE</u> Length <u>10'</u> Set between <u>34</u> ft. and <u>44</u> ft. Fittings: Gravel pack <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Size range of material <u>1/8 down</u>
			<u>BLUESHALE</u>	<u>38</u>	<u>50</u>	9 Static water level: <u>36</u> ft. below land surface Date <u>10-1-75</u>
			<u>As shown 38' thru</u>			10 Pumping level below land surfaces: <u> </u> ft. after <u> </u> hrs. pumping <u> </u> g.p.m. <u> </u> ft. after <u> </u> hrs. pumping <u> </u> g.p.m. Estimated maximum yield <u>8</u> g.p.m.
			<u>LOCATION</u>			11 Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date <u> </u>
						12 Well head completion: <input type="checkbox"/> Pitless adapter <input checked="" type="checkbox"/> <u>7</u> 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"/> <u> </u> Depth: From <u>0</u> ft. to <u>12</u> ft.
						14 Nearest source of possible contamination: ft. <u> </u> Direction <u> </u> Type <u> </u> Well disinfected upon completion? <input type="checkbox"/> Yes <input type="checkbox"/> No
						15 Pump: <input type="checkbox"/> Not installed Manufacturer's name <u>REDA</u> Model number <u>909051</u> HP <u>1/2</u> Volts <u>220</u> Length of drop pipe <u>42</u> ft. capacity <u>15</u> g.m.p. Type: <input checked="" type="checkbox"/> Submersible <input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating <input type="checkbox"/> Centrifugal <input type="checkbox"/> Other
16 Remarks: elevation			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. <u>DEAN WATERHOUSE DRILLING 243</u> Business name <u>HANSTON KANSAS</u> License No. <u> </u> Address <u> </u> Signed <u> </u> Date <u>11-1-75</u> Authorized representative			
			(use a second sheet if needed)			
Topography: <input type="checkbox"/> Hill <input checked="" type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley						

Forward the white, blue and pink copies to the Kansas State Dept. Of Health.

Form WWC-5