

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 S. 100 ft. SE Corner Blk 1, Gross Add'n, 31-185-21W

changed to NW NE NW, 31-185-21W

Other changes: Initial statements: \_\_\_\_\_

Changed to: \_\_\_\_\_

Comments: NW of corner of Bellevue & Waumbaugh; property is the south 100 ft. of the east 1/2 of Block 1, Gross Addition.

verification method: Phone call to County Register of Deeds, Bazine ownership map from County Appraiser, and Bazine 1:24,000 topo. map. initials: \_\_\_\_\_ date: \_\_\_\_\_

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

*handwritten*  
SOUTH 100 FT SE CORNER BIRK  
GROSS ADDITION

1 Location of well:		County <b>NESS</b>	Township name <b>BAZINE</b>	Fraction <b>31</b>	Section number <b>31</b>	Town number <b>T18S</b>	Range number <b>R21W</b>
Distance and direction from nearest town or city: <b>2 TOWN</b>				3 Owner of well: <b>ELMER MARSHALL</b>			
Street address of well location if in city: <b>NOT KNOWN</b>				Address: <b>BAZINE KANSAS</b>			
Locate with "X" in section below:		Sketch map:		4 Well depth: <b>56</b> ft. Date of completion <b>6-1-75</b> Well diameter <b>5 1/2</b> in.			
				5 <input checked="" 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			
2		Type and color of material		From	To	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"/> <i>for hand</i>	
		TOP & LIGHT COLORED CLAY		0	8	7 Casing: Material <b>PLASTIC</b> Height: above/below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <b>24</b> in. Diam. _____ Weight <b>220</b> lbs./ft. <b>0</b> in. to <b>46</b> ft. depth Drive shoe? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No _____ in. to _____ ft. depth!	
		COURSE SAND TOOK A LOT OF WATER		18	24	8 Screen: Manufacturer <b>SUNFLOWER</b> Type <b>STRENGTH</b> Dia. <b>5'</b> Slot/gauze <b>FINE</b> Length <b>10'</b> Set between <b>46</b> ft. and <b>56</b> ft. Fittings: Gravel pack <input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No Size range of material <b>1/8" DOWN</b>	
		SOFT TANCY CLAY, STICKY		24	46	9 Static water level: <b>42</b> ft. below land surface Date <b>6-1-75</b>	
		FINE SAND - GETS COURSE WITH DEPTH		46	52	10 Pumping level below land surfaces: <b>42 1/2</b> ft. after <b>4</b> hrs. pumping <b>15</b> g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield <b>90</b> g.p.m.	
		BLACK SHALE		<b>52</b>	<b>58</b>	11 Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____	
		BR 52'				12 Well head completion: <input type="checkbox"/> Pitless adapter <b>2 1/2</b> inches above grade	
		LOCATION				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 <b>0</b> ft. to <b>12</b> ft.	
						14 Nearest source of possible contamination: ft. _____ Direction _____ Type _____ Well disinfected upon completion? <input type="checkbox"/> Yes <input type="checkbox"/> No	
						15 Pump: <input type="checkbox"/> Not installed Manufacturer's name <b>REBA</b> Model number <b>9P9R051HP</b> <b>1 1/2</b> Volts <b>230</b> Length of drop pipe <b>32</b> ft. capacity <b>15</b> g.p.m. 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							
Topography: <input type="checkbox"/> Hill <input checked="" type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley				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. <b>DEAN WATERHOUSE DRUG 243A</b> Business name _____ License No. _____ Address <b>HANSTON, KANSAS</b> Signed <i>[Signature]</i> Date <b>12-26-75</b> Authorized representative			

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

Farm WWC-5