CORRECTION(S) TO WATER WEL (to rectify lacking or incorrec		` '	
(a same g a same same	,	County: changed to:	Wich

Location listed as:	Location changed to:
Section-Township-Range: 7-185-35W	18-185-35 W
Fraction (1/4 1/4 1/4): SE NE SE	SE NE SE
Other changes: Initial statements:	
Changed to:	
Comments:	
verification method: Written description, lo	cations of other monitoring
wells for same project and ma	aping tool & aerial photos
verification method: Written description, lowells for same project, and ma on KGS website.	initials: DRL date: 9/25/2008

submitted by: Kansas Geological Survey, Data Resources Library, 1930 Constant Ave., Lawrence, KS 66047-3726 to: Kansas Dept of Health & Environment, Bureau of Water, 1000 SW Jackson, Suite 420, Topeka, KS 66612-1367.

				R WELL REC	ORD Form V		KSA 82a-1				
		ATER WELL:	Fraction		, ,		Number	Township Num			Number
	Wichita		SE 1/4	NE ¼	SE 1/4		7	T 18	S	R 35	₽(W)
		on from nearest to rienthal, Kans	-	address of wel	I if located with	in city?					
	ER WELL C		oop Association								
	Address, B	ox# : P.O. Bo						Board of Agricultu	re. Divis	ion of Water	Resources
City, Stat	e, ZIP Code	Scott C	City, Kansas 6787					Application Number	er:		
		LOCATION SECTION BOX:	i i					ΠΟΝ:			
VVIIII	AN A 111 C	N I						<u>.</u>			
T		T						ace measured on r			
								rh			
	NW	NE						rh			
Wije W		_	Bore Hole Diame	ter 2	. in. to	. 145	ft., an	d	in.	to	ft.
≅ W		E	WELL WATER T	O BE USED A	AS: 5 Public	water sup	oply 8	Air conditioning	11 I	njection well	ĺ
.			1 Domestic	3 Feedlot	6 Oil fiel	d water su	ipply 9	Dewatering	(12)	Other (Specif	y below)
	SW	SE X	2 Irrigation					Monitoring well	$\mathcal{L}_{\mathcal{L}}$	Air Sparge	
1			Was a chemical	/bacteriologica	al sample subm	itted to De	epartment?	YesNo	.; If yes,	mo/day/yr s	ample was
Y		<u> </u>	submitted				Wate	r Well Disinfected?	Yes	No	\checkmark
5 TYPE	OF BLANK	CASING USED:		5 Wrought iro	on 8 (Concrete	tile	CASING JOINT	S: Glued	Clar	mped
1 S	Steel	3 RMP (SF	₹)	6 Asbestos-C	ement 9	Other (spe	ecify below)		Welde	ed	
(2)P		4 ABS		7 Fiberglass					Threa	ded. 🏑	
					a	in. to .	<i>.</i>	ft., Dia		in. to	ft.
								Wall thickness or			
•	•	OR PERFORATION		, 3		PVC		10 Asbest			
1 S		3 Stainless		5 Fiberglass		RMP (S	SR)				
	Brass	4 Galvanize		6 Concrete til		ABS	,	12 None u			
		PRATION OPENIN			Gauzed wrap		8	Saw cut		11 None (or	nen hole)
	Continuous s				Wire wrapped			Drilled holes		TT THORIC (OF	
	ouvered sh	()	ey punched		Torch cut	-		Other (specify).			
		TED INTERVALS:	• .			42					
SCREEN	FEN OIV	ILD INTLINVALO.									ft
(GRAVEL PA	ACK INTERVALS:									
Ì	0.4.422.7										
al CDOLL	T MATERIA	I: 1 Neat o		Cement grou		Bentonite		ther			
								ft, From			
		source of possible		11., 110/11			10 Livesto			andoned wat	
		•		7 Pit pr	ris a c		11 Fuel sto	•		well/Gas wel	1
•	tic tank	4 Later		•	-			-	_	ner (specify l	
	ver lines	5 Cess er lines 6 Seep	•	9 Feed	ige lagoon		12 Fertilize	ide storage		rmer UST	
	tertight sewe from well?		age pit	5 T eeu;	yaru		How many		Г О	riner os i	·Dasiii · · ·
FROM	110111 Weir	east	LITHOLOGIC L	OG	FRO		10 1		GINGTN	TERVALS	
0	0.5	Asphalt,									
0.5	27	Clay, Light Bi	rown								
27	31	Caliche, Off V								-	
31	36	Clay, Light B									
	55	Sand, Brown									
36	57	Caliche, Off V	White							4	
55_			v mite								
57	65	Sand, Brown	Vhito								
65	73	Caliche, Off V	ville								
73	76	Sand, Brown									
76	105	Clay, Light Bu									
105	118	Clay, Light Br									
118	120	Caliche, Off V	Vhite				1.5-	70 11 0000	F1 1		
120	145	Sand, Brown						, Tag # 00295617,			
								ject Name: Greenfi			e Association
								Core # 831, KDHE			
					well was (1) co	onstructed	d, (2) recon	structed, or (3) plus	gged und	der my jurisdi	ction
പ and was d	completed of	n (mo/day/year) .		3/16/00		а	nd this reco	ord is true to the be	st of my	knowledge a	
Kansas W	/ater Well C	Contractor's Licens	se No	527	This Water	Well Rec	ord was co	mpleted on mo/da	//yr) /	1 4/21/	
	business na	_		Services, I			y (signature		Col		1
INSTR	UCTIONS: Us	e typewriter or ball poir	nt nen PLEASE PRE	SS FIRMLY and F	PRINT clearly. Ple	ase fill in bla	anks, underline	or circle the correct an	swers. Se	nd top three cop	ies to Kansas
Depart	ment of Health	and Environment, Bure	eau of Water, Topeka,	Kansas 66620-00	01. Telephone: 91	3-296-5545.	Send one to	WATER WELL OWNER	and retair	one for your red	ords.