

CORRECTION(S) TO WATER WELL RECORD (WWC-5)
(to rectify lacking or incorrect information)

County: Ness

Location listed as:

Section-Township-Range: 4-19S-12W

Fraction (1/4 1/4 1/4): SE SW NW

Location changed to:

4-19S-21W

SE SW NW

Other changes: Initial statements: _____

Changed to: _____

Comments: _____

verification method: Written & legal descriptions, and

Bazine 1:24,000 topo map.

initials: DRL date: 3/4/2004

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.

1 LOCATION OF WATER WELL:	Fraction SE 1/4 SW 1/4 NW 1/4	Section Number 4	Township Number T 19 S	Range Number R 12W E/W
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Distance and direction from nearest town or city street address of well if located within city?
 3E, 2S, 1W of Bazine, Ks.

2 WATER WELL OWNER: Elton Margheim
 RR#, St. Address, Box #: P. O. Box 96 Board of Agriculture, Division of Water Resources
 City, State, ZIP Code: Bazine, KS 67516 Application Number:

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4 DEPTH OF COMPLETED WELL: <u>207</u> ft. ELEVATION: <u>unknown</u>
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Depth(s) Groundwater Encountered 1. 120 ft. 2. _____ ft. 3. _____ ft.

WELL'S STATIC WATER LEVEL 120 ft. below land surface measured on mo/day/yr 08/19/03

Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm

Est. Yield 25 gpm: Well water was _____ ft. after _____ hours pumping _____ gpm

Bore Hole Diameter: 8 in. to 207 ft., and _____ in. to _____ ft.

WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well
 1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)
 2 Irrigation 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well

Was a chemical/bacteriological sample submitted to Department? Yes. No; If yes, mo/day/yr sample was submitted

Water Well Disinfected? Yes _____ No _____

5 TYPE OF BLANK CASING USED:

1 Steel	3 RMP (SR)	6 Asbestos-Cement	9 Other (specify below)	CASING JOINTS: Glued _____ Clamped _____
2 PVC	4 ABS	7 Fiberglass		Welded _____
				Threaded _____

Blank casing diameter 5 in. to 187 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.

Casing height above land surface 12 in., weight 2.8 lbs./ft. Wall thickness or gauge No. Sch. 40

TYPE OF SCREEN OR PERFORATION MATERIAL:

1 Steel	3 Stainless steel	5 Fiberglass	8 RMP (SR)	10 Asbestos-cement
2 Brass	4 Galvanized steel	6 Concrete tile	9 ABS	11 Other (specify) _____
				12 None used (open hole)

SCREEN OR PERFORATION OPENINGS ARE:

1 Continuous slot	3 Mill slot	5 Gauzed wrapped	8 Saw cut	11 None (open hole)
2 Louvered shutter	4 Key punched	6 Wire wrapped	9 Drilled holes	
		7 Torch cut	10 Other (specify) _____	

SCREEN-PERFORATED INTERVALS: From 187 ft. to 207 ft., From _____ ft. to _____ ft.

GRAVEL PACK INTERVALS: From 33 ft. to 207 ft., From _____ ft. to _____ ft.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other _____

Grout intervals: From 0 ft. to 33 ft., From _____ ft. to _____ ft.

What is the nearest source of possible contamination:

1 Septic tank	4 Lateral lines	7 Pit privy	10 Livestock pens	14 Abandoned water well
2 Sewer lines	5 Cess pool	8 Sewage lagoon	11 Fuel storage	15 Oil well/Gas well
3 Watertight sewer lines	6 Seepage pit	9 Feedyard	12 Fertilizer storage	16 Other (specify below)
			13 Insecticide storage	

Direction from well? South How many feet? 100

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	2	top soil			
2	25	clay			
25	29	sand and gravel			
29	180	shale			
180	207	sand rock shale bottom			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 08/19/03 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's Licence No. 186 This Water Well Record was completed on (mo/day/yr) 08/21/03 under the business name of Kelly's Water Well Service, Inc. by (signature) Kathryn Reed