

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

(to rectify lacking or incorrect information)

Location listed as:

Section-Township-Range: 5-5-3 W

Fraction (  $\frac{1}{4}$   $\frac{1}{4}$   $\frac{1}{4}$ ): NE SE

County: Republic

Location changed to:

5-1 S-3 W

SW NE NE SE

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

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

Comments: \_\_\_\_\_

verification method: Latitude & longitude & KGS "LEO" conversion tool,  
Republic County online parcel search, and mapping tool &  
aerial photos on KGS website. initials: DRK date: 9/20/2011

submitted by: Kansas Geological Survey, Data Resources Library, 1930 Constant Ave., Lawrence, KS 66047-3726

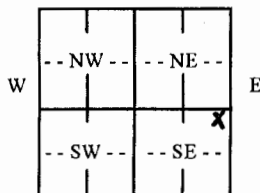
to: Kansas Dept of Health & Environment, Bureau of Water, 1000 SW Jackson, Suite 420, Topeka, KS 66612-1367.

## WATER WELL RECORD

## Form WWC-5

Division of Water Resources App. No. 

<b>1 LOCATION OF WATER WELL:</b> County: REPUBLIC	Fraction $\frac{1}{4}$ $\frac{1}{4}$ NE $\frac{1}{4}$ SE $\frac{1}{4}$	Section Number 5	Township No. T    S    S	Range Number R 3 <input type="checkbox"/> E <input checked="" type="checkbox"/> W
Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here <input type="checkbox"/> .		<b>Global Positioning System (GPS) information:</b> Latitude: 39 59 35.8 (in decimal degrees) Longitude: 097 40 13.8 (in decimal degrees) Elevation: ..... Datum: <input type="checkbox"/> WGS 84, <input type="checkbox"/> NAD 83, <input type="checkbox"/> NAD 27 Collection Method: <input type="checkbox"/> GPS unit (Make/Model: .....) <input type="checkbox"/> Digital Map/Photo, <input type="checkbox"/> Topographic Map, <input type="checkbox"/> Land Survey Est. Accuracy: <input type="checkbox"/> <3 m, <input type="checkbox"/> 3-5 m, <input type="checkbox"/> 5-15 m, <input type="checkbox"/> >15 m		
<b>2 WATER WELL OWNER:</b> EGBERT TIETJEN RR#, Street Address, Box #: PO BOX 308 City, State, ZIP Code : CHESTER, NE 68327				

**3 LOCATE WELL WITH AN "X" IN SECTION BOX:**  
 N

**4 DEPTH OF COMPLETED WELL** 190 ..... ft.

 Depth(s) Groundwater Encountered (1) ..... ft. (2) ..... ft. (3) ..... ft.  
 WELL'S STATIC WATER LEVEL 151 ..... ft. below land surface measured on mo/day/yr .....

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

EST. YIELD 20 ..... gpm. Well water was ..... ft. after ..... hours pumping ..... gpm

Bore Hole Diameter 10 ..... in. to 20 ..... ft., and 8 ..... in. to 190 ..... ft.

 WELL WATER TO BE USED AS: ☐ Public water supply ☐ Geothermal ☐ Injection well

☒ Domestic ☐ Feedlot ☐ Oil field water supply ☐ Dewatering ☐ Other (Specify below)

☐ Irrigation ☐ Industrial ☐ Domestic-lawn & garden ☐ 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 CASING USED:** ☐ Steel ☒ PVC ☐ Other .....

 CASING JOINTS: ☒ Glued ☐ Clamped ☐ Welded ☐ Threaded

Casing diameter 4 ..... in. to 170 ..... ft., Diameter ..... in. to ..... ft., Diameter ..... in. to ..... ft.

Casing height above land surface 12 ..... in., Weight ..... lbs./ft., Wall thickness or gauge No. 173 .....

**TYPE OF SCREEN OR PERFORATION MATERIAL:**
☐ Steel ☐ Stainless Steel ☒ PVC ☐ Other (Specify) .....

☐ Brass ☐ Galvanized Steel ☐ None used (open hole)

**SCREEN OR PERFORATION OPENINGS ARE:**
☐ 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 170 ..... ft. to 190 ..... ft., From ..... ft. to ..... ft.

From ..... ft. to ..... ft., From ..... ft. to ..... ft.

GRAVEL PACK INTERVALS: From 15 ..... ft. to 190 ..... ft., From ..... ft. to ..... ft.

From ..... ft. to ..... ft., From ..... ft. to ..... ft.

**6 GROUT MATERIAL:** ☐ Neat cement ☐ Cement grout ☒ Bentonite ☐ Other .....

Grout Intervals: From 0 ..... ft. to 15 ..... ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.

**What is the nearest source of possible contamination:**
☐ Septic tank ☐ Lateral lines ☐ Pit privy ☐ Livestock pens ☐ Insecticide storage ☐ Other (specify below)

☐ Sewer lines ☐ Cesspool ☐ Sewage lagoon ☐ Fuel storage ☐ Abandoned water well

☐ Watertight sewer lines ☐ Seepage pit ☐ Feedyard ☐ Fertilizer storage ☐ Oil well/gas well **NONE KNOWN**

Direction from well ..... Distance from well .....

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
0	30	TOPSOIL & CLAY			
30	40	SAND & CLAY			
40	72	FINE SAND			
72	105	SANDY CLAY			
105	186	MEDIUM SAND & GRAVEL			
186	188	OCHRE			
188	190	GRAY SHALE			

**7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:** This water well was ☒ constructed, ☐ reconstructed, or ☐ plugged under my jurisdiction and was completed on (mo/day/year) 03/30/2011 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 741. This Water Well Record was completed on (mo/day/year) 03/31/2011 under the business name of WATSON WELL DRILLING, INC. by (signature) *Michael H. Watson*

**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 785-296-5522. 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>.