County: <u>Jewe</u> // Fraction <u>SW NE NE SW</u>	Sec <u>30</u> T/S_R6EW)							
CORRECTION(S) TO WATER WELL COMP	, ,							
Owner: Clarence & Shirley Dove	information)							
Location was listed as:	Location changed to:							
Section-Township-Range: 30-15-6	30-15-6W							
Fraction (1/4 1/4 1/4):	SW NE NE SW							
Other changes: Initial statements: Latitude & lon	rgitude are unclear							
Changed to: Lat /long believed to be	39°56′05.5″\$ 98°02′11.0″							
Datum believed to be WG58	4							
Comments: Well owner's street addres:	s is 206 N. Western Ave.,							
Webber, KS 66970.								
Verification method: Latitude & longitude, KG	5' "LEO" conversion tool							
well owner's address & city street	map, and mapping tool &							
aerial photos on KGS website.	initials: DR date: 4/28/2016							
Submitted by: Kansas Geological Survey, Data Resources Library, 1930 Co.	nstant Ave., Lawrence, KS 660473726							
to: Kansas Dept of Health & Environment, Bureau of Water, 1000 SW Jackson, Suite 420, Topeka, KS 66612-1367.								

		WA	TER WELL RECOF	RD Form WWC-	5 KSA 82	2a-1212 ID N	0				
	ATION OF W	/ATER WELL:	Fraction	NW. 56		Section Number	Township Numb	er	Range Number		
ST HE SEASON THE SEASON STATE OF THE SEASON SERVICE STATE OF THE SEASON SEASON SERVICE STATE OF THE SEASON	Charles and the Control of the Contr	The state of the s	yn or city street add	lress of well if locate	d within situ	70	I T	S	R D E/W		
			or only street add	ness of well if locate	a within city			700	DO 03/3		
2 WAT	ER WELL O	WNER: CLASS	nel + In	Mus Po	ve.			43	02 110		
	Address, Bo e, ZIP Code		SOY 183	106970			Board of Agricu Application Nur		vision of Water Resource		
3 LOCAT	E WELL'S L			MPLETED WELL		7 ft. ELEVA	ΓΙΟΝ:				
AN "X"	IN SECTION		WLLLO STATIC VI	VAICH LEVEL	1ft. b	elow land surface	2	ft. 3	ft.		
	i	7 1	Fullip	lesi dala. Well wat	er was	of Additional Little	fter h	Oure nun	nning		
-	-NW	NE	WELL WATER TO	BE USED AS: 5	er was	····· ft. a r supply	fterh  8 Air conditioning	ours pun	mping gpm ection well		
w-	4	- <u> </u> E	1 Domestic 2 Irrigation	3 Feedlot 6	Oil field wa	ter supply	9 Dewatering	12 Oth	ner (Specify below)		
	CVV	0.5									
	-SW	SE	Was a chemical/bamitted	acteriological sample	submitted t	Department? Y	es; If	yes, moi	/day/yrs sample was sub-		
	Mitted Water Well Disinfected? Yes No										
5 TYPE	OF BLANK	CASING USED:	5	Wrought iron	8 Cond	crete tile	CASING IOINTS	: Gluod			
1 Ste		3 RMP (SR 4 ABS		Asbestos-Cement Fiberglass	9 Othe	r (specify below)		Welded	1		
A CONTRACTOR OF THE PARTY OF TH						in to	# Dia	Thread	ed in. toft.		
Casing ne	signi above i	and sunace	······································	. in., weight	••••••	III. 10 I	bs./ft. Wall thickness o	r quage	in. to		
TITLO	SCHEEN O	RPERFURATION	MAIERIAL:		(ZF	VC	10 Asbesto				
1 Ste 2 Bra		3 Stainless 4 Galvanize		Fiberglass Concrete tile	8 F	MP (SR) BS	11 Other (S 12 None us	pecify)	, hole)		
SCREEN	OR PERFO	RATION OPENING			zed wrapped		8 Saw cut				
	ntinuous slot uvered shutte				wrapped		9 Drilled holes		1 None (open hole)		
		ED INTERVALS:	y punched		3	7	10 Other (specify)		ft.		
			1 10111	a		ff From		ft to	ft.		
	GRAVEL PA	CK INTERVALS:	FIUIII	II. IO		ft From		ft to	tı.		
			1 10111	π. το	•••••	ft., From		. ft. to	π. ft.		
	UT MATERIA	No. of Contract of	1000	2 Cement grout	3 Be	ntonite 4	Other				
Grout Inte		urce of possible c	ft. to	ft., From	ft.	to	ft., From	f	t. toft.		
	ptic tank	4 Latera		7 Pit privy		10 Livesto			ndoned water well		
2 Se	wer lines	5 Cess p		8 Sewage	lagoon	11 Fuel sto			vell/Gas well er (specify below)		
		er lines 6 Seepa	ge pit	9 Feedyard					er (specify below)		
Direction f						How many					
FROM	ТО	angered and an	LITHOLOGIC LO	1	FROM	ТО	PLUGGIN	NG INTE	RVALS		
20	38	A AFRICA	el 40	lack							
38	50	Sandi	2 Clai	The state of the s							
50	59	Landy	Clair W/	RAPDO HIS	e STEET	Q					
379	69	Hilaly	Sha	10							
		<u> </u>									
		a company of the comp									
CONTR	ACTOR'S O	B I ANDOWNED	S CERTIFICATION	. This woter	- 60						
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)											
Tatol Troll	Contractor 3	LICETICE INC	74/	This Water	Well Record	was completed	on (mo/day/yr)	ily knowl	euge and belief. Kansas		
	domedo nam	COLULTIANO	UNIVERSE TO THE PROPERTY OF TH	DINKLING	4	by (sig	inature)	0 6	/ I MADOTAL		
			n, 1000 SW Jackson St	and <u>PRINT</u> clearly. Please Suite 420, Topeka, Kansas	fill in blanks, und	derline or circle the cor	rect answers. Send top three	copies to Ka	ansas 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 to WATER WELL OWNER and retain one for your											