

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 C SE SE, 9-225-R3W

changed to C SE, 9-225-3W

Other changes: Initial statements: _____

Changed to: _____

Comments: _____

verification method: phone call to well driller, written & legal descriptions,
position on plat map, and Buhler, Halstead NW, initials: DR date: 12/6/2001
& Moundridge 1:24,000 topo. maps.

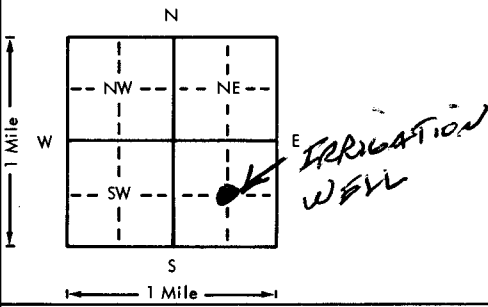
submitted by: Kansas Geological Survey, Data Resources Library, 1930 Constant Ave., Lawrence, KS 66047-3726

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

Kansas Department of Health and
Environment-Division of Environment
(Water well Contractors)
Topeka, Kansas 66620

1. Location of well:		County HARVEY	Fraction C 1/4 SE 1/4 SE 1/4	Section number 9	Township number T 22	Range number S R' R 3 E/W
2. Distance and direction from nearest town or city: Street address of well location if in city:			3. Owner of well: CLIFFORD SCHMIDT R.R. or street: RR1 MOONRIDGE, KANSAS City, state, zip code: 67107			
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. 30 in. Completion date 2-17-76 Well depth 198 ft.		
				7. <input type="checkbox"/> Cable tool <input 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 checked="" type="checkbox"/> Reverse rotary		
5. Type and color of material				8. 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"/> Stock <input type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other		
				9. Casing: Material TRANS Height: Above or below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface 12" in. RMP <input type="checkbox"/> PVC <input type="checkbox"/> Weight 35 lbs./ft. Dia. 16 in. to 198 ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. 34"		
				10. Screen: Manufacturer's name AURORA TILE CO Type TRANSITE Dia. 16" I.D. Slot/gauze 1/8 Length 65 ft Set between 133 ft. and 198 ft. ft. and <input type="checkbox"/> ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material 1/4"		
				11. Static water level: <input type="checkbox"/> mo./day/yr. 26 ft. below land surface Date 2-17-76		
				12. Pumping level below land surfaces: NO TEST <input type="checkbox"/> ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. <input type="checkbox"/> ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. Estimated maximum yield 1500 g.p.m.		
				13. Water sample submitted: <input type="checkbox"/> mo./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date <input type="checkbox"/>		
				14. Well head completion: <input type="checkbox"/> Pitless adapter <input type="checkbox"/> Inches above grade		
				15. Well grouted? YES CLAY With: <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Concrete Depth: From 0 ft. to 25 ft.		
				16. Nearest source of possible contamination: from WELLS Direction NO Type IRREGULAR Well disinfected upon completion? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
				17. Pump: <input type="checkbox"/> Not installed Manufacturer's name WESTERN LAND Model number 8M HP 6-H. Volts <input type="checkbox"/> Length of drop pipe 120 ft. capacity 900 g.p.m. Type: <input type="checkbox"/> Submersible <input checked="" type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating <input type="checkbox"/> Centrifugal <input type="checkbox"/> Other		
18. Elevation:		19. Remarks:		20. 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. PETERS & BOOS INC 138 Business name LINDSAY K S License No. 000150 Address WALLACE & PETERSON Date 2-18-76 Signed Wallace & Peterson Authorized representative		
Topography: <input type="checkbox"/> Hill <input checked="" type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley						