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

(to rectify lacking or incorrect information)

LOCATION OF WATER WELL: County:	Fraction	•		Section	Township T		Range R	E [	¬w
Owner:					<u> </u>		TC		
Location was listed as:				Location change	d to:				
Sec T S	R □F	: $\square w$			_ T	S	R	ПЕ Г	٦w
		, LI 11							'''
Fraction:				Fraction: _					
Other changes: Initial statements:									
Changed to									
Changed to:			 						
Comments:									
Varification mathed									
Verification method:			 						
			 	ini					
Submitted by: Kansas Geolog to: Kansas Dept of Health &	_								

				ER WELL RECORD	Form WWC-5				_	
	ON OF WAT	ER WELL:	1	NCO E side	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	tion Number	Township Nui		Range Nu	
	Reno	from poorgot tou	un or eity street	4 1/4 1/2 address of well if loca		25	T 22	S	R 4	<b>R</b> /W
			-		ted within city?					
				h of Buhler						
		_	Beds GMD	#2			Board of Ac	rioulturo F	Division of Wate	r Pesource
•	Address, Box			65056					AVISION OF Wate	i nesource:
				s 67056						
AN "X"	IN SECTION	BOX:		COMPLETED WELL.  dwater Encountered						
τ Γ	ı	1		C WATER LEVEL						
I 1	1		Pum	np test data: Well wa	iter was	ft. a	fter	hours pur	mping	gpm
	NW	NEX	Est. Yield	gpm: Well wa	iter was	ft. a	fter	hours pur	mping	gpm
	ij		Bore Hole Diam	neter4.0in. t	o195	ft., :	and	in.	to $\dots$	
₹ w F	1		WELL WATER	TO BE USED AS:	5 Public wate	r supply	8 Air conditioning	11	njection well	
7	sw l	SE	1 Domestic	3 Feedlot	6 Oil field war	ter supply	9 Dewatering	12 (	Other (Specify b	oelow)
	3\\	3	2 Irrigation				10 Observation well			
↓ L	i	1	Was a chemical	l/bacteriological sample	submitted to De	epartment? Yo	esNoX	; If yes,	mo/day/yr sam	ple was sub
	S		mitted				ter Well Disinfected		No	X
5 TYPE	OF BLANK C	ASING USED:		5 Wrought iron	8 Concre	ete tile	CASING JOIN	ITS: Glued	ⅠX Clamp	ed
1 St	eel	3 RMP (S	R)	6 Asbestos-Cemen		(specify below	•		ed	
2 P\		4 ABS		7 Fiberglass					ded	
				ft., Dia						
_	-			in., weight			ft. Wall thickness of	gauge No	)	
		R PERFORATIO			7 PV	-	10 Asbe	stos-ceme	<sub>nt</sub> Johnson Wellpoint	- Newiew
1 St		3 Stainless		5 Fiberglass		IP (SR)		•	Wellpoint	٠
2 Br		4 Galvaniz		6 Concrete tile	9 AB	S		used (ope		n hala\
		RATION OPENIN			zed wrapped				11 None (oper	n noie)
	ontinuous slo		fill slot		e wrapped ch cut		9 Drilled holes 10 Other (specify)			
	ouvered shutt		(ey punched	. 192 ft. to		# Ero	` ' '			
SCHEEN-	PERFURATE	D INTERVALS:		ft. to						
	CDAVEL DA	CK INTERVALS:		ft. to						
`	GRAVEE FA	DK INTERVALO.	From	ft. to		-	m		)	
6 GBOUT	T MATERIAL	: 1 Neat					Other			
Grout Inte				ft., From						
		urce of possible							andoned water	
	eptic tank	•	ral lines	7 Pit privy		11 Fuel	•		I well/Gas well	
	ewer lines	5 Cess		8 Sewage la	igoon					low)
3 W	atertight sew	er lines 6 Seep	•	9 Feedyard		13 Insec	ticide storage			
Direction 1	from well?	·	•	•		How ma	ny feet?			
FROM	то		LITHOLOGIC	LOG	FROM	TO	L	ITHOLOG	IC LOG	
0	3	Top soil		addrade of the second or the second				****		
3	88		d, brown,							
88	98	Sand & Gr	avel - whi	te						
98	99	Clay - ta								
99	112	Sand & Gr	avel - whi	te						
112	116	<u>Clay - br</u>								
116	124		avel - whi	te						
124	183	Clay - ta								
183	195	Sand & Gr	avel - yel	lowish white			E	-39B		
	ļ								****	
******										
	ļ ———									
	1					<del>                                     </del>				
	1 1					L	*	WV-PT-		
										an and was
				TION: This water well						
completed	on (mo/day/	year)	6-12-	81		and this reco	ord is true to the bes	t of my kno	owledge and bel	lief. Kansas
completed Water Wel	on (mo/day/	year)	6-12-	81 r . Dept This Water		and this reco	ord is true to the beson (mo/day/yr)	t of my kno	owledge and bel	lief. Kansas
completed Water Wel	on (mo/day/ Il Contractor's business nar	year) S License NoWi ne of Equus	6-12-6 chita Wate: Beds GMD	81	Well Record wa	and this reco s completed by (signa	ord is true to the beson (mo/day/yr) ture)	t of my kno	owledge and bell -6-81	lief. Kansas
completed Water Wel under the INSTRUC	on (mo/day/ Il Contractor's business nar TIONS: Use t	year)s License NoWi ne of Equus ypewriter or ball	chita Wate: Beds GMD point pen, PLEAS	81 r . Dept This Water	Well Record wa	and this reco s completed by (signa y. Please fill in	ord is true to the bes on (mo/day/yr) ture) n blanks, underline o	t of my kno	owledge and be -6-81	lief. Kansas