

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

(to rectify lacking or incorrect information)

County: Harvey

Location listed as:

Location changed to:

Section-Township-Range: 35-22S-2W

35-23S-2W

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

N2 SW SW

Other changes: Initial statements: _____

Changed to: _____

Comments: _____

verification method: Well address, city street map, and
mapping tool on KGS website.

initials: DR date: 1/23/2007

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	Section Number	Township Number	Range Number
County: <u>Harvey</u>		<u>SE ¼ SW ¼ SW ¼</u>	<u>35</u>	T <u>22</u> S	R <u>2</u> E <u>(W)</u>
Distance and direction from nearest town or city street address of well if located within city? <u>403 Sweezy in Halstead</u>					
2 WATER WELL OWNER:		Board of Agriculture, Division of Water Resources			
RR#, St. Address, Box # : City, State, ZIP Code :		Application Number:			
<u>Mildred Hill</u> <u>403 Sweezy</u> <u>Halstead, KS 67056</u>					
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL . . . 116 . . . ft. ELEVATION:			
<p>A 2x2 grid representing a section box. The quadrants are labeled NW, NE, SW, SE. An 'X' is marked in the SW quadrant.</p>		Depth(s) Groundwater Encountered 1. ft. 2. ft. 3. ft.			
		WELL'S STATIC WATER LEVEL . . . 26 . . . ft. below land surface measured on mo/day/yr . . . 5-19-92 . . .			
		Pump test data: Well water was . . . 41 . . . ft. after . . . 1 . . . hours pumping . . . 25 . . . gpm			
		Est. Yield gpm: Well water was ft. after hours pumping gpm			
		Bore Hole Diameter . . . 8 . . . in. to . . . 126 . . . 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 Lawn and garden only 10 Monitoring well			
Was a chemical/bacteriological sample submitted to Department? Yes No X . . . ; If yes, mo/day/yr sample was submitted		Water Well Disinfected? Yes X No			
5 TYPE OF BLANK CASING USED:		CASING JOINTS: Glued . . . X . . . Clamped			
1 Steel 3 RMP (SR)		Welded			
② PVC 4 ABS		Threaded			
Blank casing diameter . . . 5 . . . in. to . . . 106 . . . ft., Dia in. to ft., Dia in. to ft.					
Casing height above land surface . . . 12 . . . in., weight . . . 2.37 . . . lbs./ft. Wall thickness or gauge No. 160 . . .					
TYPE OF SCREEN OR PERFORATION MATERIAL:		⑨ PVC 10 Asbestos-cement			
1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR)		11 Other (specify)			
2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS		12 None used (open hole)			
SCREEN OR PERFORATION OPENINGS ARE:		5 Gauzed wrapped ⑩ Saw cut 11 None (open hole)			
1 Continuous slot 3 Mill slot 6 Wire wrapped 9 Drilled holes					
2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify)					
SCREEN-PERFORATED INTERVALS:					
From . . . 106 . . . ft. to . . . 116 . . . ft., From ft. to ft.					
From ft. to ft., From ft. to ft.					
GRAVEL PACK INTERVALS:					
From . . . 22 . . . ft. to . . . 50 . . . ft., From ft. to ft.					
From . . . 55 . . . ft. to . . . 116 . . . ft., From ft. to ft.					
6 GROUT MATERIAL:		③ Bentonite 4 Other			
Grout Intervals: From . . . 2 . . . ft. to . . . 22 . . . ft., From . . . 50 . . . ft. to . . . 55 . . . ft., From ft. to ft.					
What is the nearest source of possible contamination:		10 Livestock pens 14 Abandoned water well			
1 Septic tank 4 Lateral lines 7 Pit privy 11 Fuel storage 15 Oil well/Gas well					
2 Sewer lines 5 Cess pool 8 Sewage lagoon 12 Fertilizer storage 16 Other (specify below)					
③ Watertight sewer lines 6 Seepage pit 9 Feedyard 13 Insecticide storage					
Direction from well? S		How many feet? 40			
FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	26	G+ Clay			
26	32	F Sand			
32	42	C Sand			
42	106	B + Gr Clay			
106	126	Sand + Gravel			
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) . . . 5-19-92 . . . and this record is true to the best of my knowledge and belief. Kansas					
Water Well Contractor's License No. 447 This Water Well Record was completed on (mo/day/yr) . . . 6-4-92 . . .					
under the business name of Miller Drilling by (signature) [Signature]					
INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY AND PRINT clearly. Please fill in blanks, underline or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Bureau of Water, Topeka, Kansas 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.					