

**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: 26-23 S-2 W

26-23 S-3 W

Fraction (  $\frac{1}{4}$   $\frac{1}{4}$   $\frac{1}{4}$  ): NW NW NW

NW NW NW

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

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

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

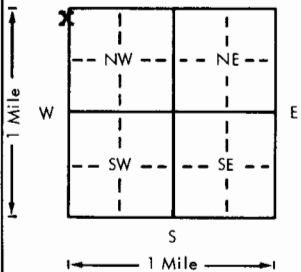
verification method: Personal communication from Don Whittemore, & locations  
given for plugging record and replacement wells at this  
same location. initials: DR date: 2/24/2011

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.

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

X Location of well:		County <b>Harvey</b>	Fraction <b>NW 1/4 NW 1/4 NW 1/4</b>	Section number <b>26</b>	Township number <b>T 23</b>	Range number <b>S R 2</b>	<b>E/W</b>
X Distance and direction from nearest town or city: <b>2 miles east of Burrton</b> Street address of well location if in city:				3. Owner of well: <b>Equus Beds GMD</b> R.R. or street: <b>Box 232</b> City, state, zip code: <b>Halstead, Ks 67056</b>			
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. <b>4</b> in. Completion date <b>4/14/78</b> Well depth <b>20.5</b> ft.			
				7. Cable tool <input checked="" type="checkbox"/> Rotary <input type="checkbox"/> Driven <input type="checkbox"/> Dug <input type="checkbox"/> Hollow rod <input type="checkbox"/> Jetted <input checked="" type="checkbox"/> Bored <input type="checkbox"/> Reverse rotary			
X Type and color of material		From		To		8. Use: <input type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry <input type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input type="checkbox"/> Stock <input type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input checked="" type="checkbox"/> Other	
<b>Log not available</b>						9. Casing: Material <b>steel</b> Height: Above or below Threaded <input checked="" type="checkbox"/> Welded <input type="checkbox"/> Surface <b>1.87</b> ft. in. RMP <input type="checkbox"/> PVC <input type="checkbox"/> Weight <input type="checkbox"/> lbs./ft. Dia. <b>1.25</b> in. to <b>17.5</b> ft. depth <input checked="" type="checkbox"/> Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. <input type="checkbox"/>	
						10. Screen: Manufacturer's name <b>Johnson</b> Type <b>wellpoint</b> Dia. <b>1.25</b> in. Slot/gauze <b>10</b> Length <b>36</b> in. Set between <b>17.5</b> ft. and <b>20.5</b> ft. ft. and <input type="checkbox"/> ft. Gravel pack? <b>no</b> Size range of material <input type="checkbox"/>	
						11. Static water level: <input type="checkbox"/> mo./day/yr. <b>8.19</b> ft. below land surface Date <b>8/28/78</b>	
						12. Pumping level below land surfaces: ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. Estimated maximum yield <input type="checkbox"/> 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	
						Well grouted? <b>yes</b> With: <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Concrete Depth: From <b>0</b> ft. to <b>2</b> ft.	
						16. Nearest source of possible contamination: ft. <input type="checkbox"/> Direction <input type="checkbox"/> Type <input type="checkbox"/> Well disinfected upon completion? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
						17. Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name <input type="checkbox"/> Model number <input type="checkbox"/> HP <input type="checkbox"/> Volts <input type="checkbox"/> Length of drop pipe <input type="checkbox"/> ft. capacity <input type="checkbox"/> g.p.m. Type: <input type="checkbox"/> Submersible <input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating <input type="checkbox"/> Centrifugal <input type="checkbox"/> Other	
						(Use a second sheet if needed)	
18. Elevation: <b>1444 ft.</b> Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley		19. Remarks: <b>EB - 16A</b>		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. <b>Equus Beds GMD</b> Business name <input type="checkbox"/> License No. <input type="checkbox"/> Address <b>Box 232, Halstead, Ks</b> Signed <b>Thomas C. Sell</b> Date <b>1/16/79</b> Authorized representative			

Forward the white, blue and pink copies to the Department of Health and Environment

Form WWC-5