

County: Harvey Fraction NW NW NW Sec. 23 T 23 S R 3 EW

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

(to rectify lacking or incorrect information)

Owner: Equus Beds GMD

Location was listed as:

Section-Township-Range: 23-23S-2W

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

Location changed to:

23-23S-3W

NW NW NW

Other changes: Initial statements: _____

Changed to: _____

Comments: _____

Verification method: Written description, pers. comm. from
Brownie Wilson (KGS) and mapping tool on KGS website.

initials: DRL date: 8/4/2015

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 1. Location of well:	County Harvey	Fraction NW 1/4 NW 1/4 NW 1/4	Section number 23	Township number T 23 S	Range number R 2 E																														
X 2. Distance and direction from nearest town or city: 2 miles northwest of Burrton Street address of well location if in city: East 1st 1 north			3. Owner of well: Equus Beds GMD R.R. or street: Box 232 City, state, zip code: Halstead, Ks 67056																																
4. Locate with "X" in section below: <div style="display: flex; align-items: center;"> <div style="margin-right: 10px;"> Sketch map: </div> <div> 6. Bore hole dia. 4 in. Completion date 8/22/78 Well depth 146 ft. </div> </div>			7. <input checked="" type="checkbox"/> 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 type="checkbox"/> Bored <input type="checkbox"/> Reverse rotary																																
5. Type and color of material <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th>From</th> <th>To</th> </tr> </thead> <tbody> <tr> <td>Topsoil</td> <td>0</td> <td>4</td> </tr> <tr> <td>Clay, green</td> <td>4</td> <td>10</td> </tr> <tr> <td>Sandy clay, tan</td> <td>10</td> <td>27</td> </tr> <tr> <td>Clay, tan, brown</td> <td>27</td> <td>77</td> </tr> <tr> <td>Sand & gravel & clay layers</td> <td>77</td> <td>125</td> </tr> <tr> <td>Sand & gravel, white</td> <td>125</td> <td>146</td> </tr> <tr> <td>Clay, green</td> <td>146</td> <td>150</td> </tr> <tr> <td>Sand & gravel, some clay balls</td> <td>150</td> <td>178</td> </tr> <tr> <td>178 Clay, brown</td> <td>178</td> <td>195</td> </tr> </tbody> </table>				From	To	Topsoil	0	4	Clay, green	4	10	Sandy clay, tan	10	27	Clay, tan, brown	27	77	Sand & gravel & clay layers	77	125	Sand & gravel, white	125	146	Clay, green	146	150	Sand & gravel, some clay balls	150	178	178 Clay, brown	178	195	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		
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(Use a second sheet if needed)			9. Casing: Material <input type="checkbox"/> Height: Above or below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface 2.1 in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Height 2 lbs./ft. Dia. 2 in. to 143 ft. depth Wall Thickness: inches or Dia. 2 in. to 143 ft. depth Gauge No. Sch 40																																
10. Screen: Manufacturer's name Johnson Type wellpoint 1.25 in. Slot/gauze 10 Length 36 in. Set between 143 ft. and 146 ft. Grovel pack? no Size range of material			11. Static water level: 43.22 ft. below land surface Date 8/28/78																																
12. Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield _____ g.p.m.			13. Water sample submitted: _____ mo./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____																																
14. Well head completion: <input type="checkbox"/> Pitless adapter _____ Inches above grade			15. Well grouted? yes With: <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Concrete Depth: From 0 ft. to 2 ft.																																
16. Nearest source of possible contamination: _____ ft. _____ Direction _____ Type _____ Well disinfected upon completion? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			17. Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name _____ Model number _____ HP _____ Volts _____ Length of drop pipe _____ ft. capacity _____ 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																																
18. Elevation: 1450 ft. Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley			19. Remarks: EB - 17B																																
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. Equus Beds GMD Business name _____ License No. _____ Address Box 232, Halstead, Ks Signed Thomas C. Sell 1/16/79 Authorized representative			T R E Sec 1/4 1/4 1/4																																

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

Form WWC-5