

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

(to rectify lacking or incorrect information)

County: Finney

Location listed as:

Section-Township-Range: 1-235-33 W

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

Location changed to:

1-235-33 W

SW NE NE

Other changes: Initial statements: _____

Changed to: _____

Comments: _____

verification method: well owner's address, area road map,
and mapping tool & aerial photos on KGS website.

initials: DR date: 4/20/2010

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	1/4	1/4	NE	1/4	Section Number	1	Township Number	T 23	S	Range Number	R 33	EW
County: Finney														
Distance and direction from nearest town or city street address of well if located within city?														
7 1/2 m. N Hwy 83 westside														
2 WATER WELL OWNER:		Bob Lilly										Board of Agriculture, Division of Water Resources		
RR#, St. Address, Box # :		1250 Northshore Circle										Application Number:		
City, State, ZIP Code :		Garden City, KS 67853												
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: 200 ft. ELEVATION:												
		Depth(s) Groundwater Encountered 1. ft. 2. ft. 3. ft.												
		WELL'S STATIC WATER LEVEL 117 ft. below land surface measured on mo/day/yr 8-2-96												
		Pump test data: Well water was ft. after hours pumping gpm												
		Est. Yield gpm: Well water was ft. after hours pumping gpm												
		Bore Hole Diameter 9 7/8 in. to 214 ft. and in. to												
		WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well												
		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:		5 Wrought iron 8 Concrete tile CASING JOINTS: Glued X Clamped												
1 Steel 3 RMP (SR)		6 Asbestos-Cement 9 Other (specify below) Welded												
2 PVC 4 ABS		7 Fiberglass Threaded												
Blank casing diameter 5 in. to 180 ft. Dia		in. to ft. Dia in. to ft.												
Casing height above land surface 18 in., weight 200 lbs./ft. Wall thickness or gauge No.														
TYPE OF SCREEN OR PERFORATION MATERIAL:		7 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 8 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 180 ft. to 200 ft. From ft. to ft.												
GRAVEL PACK INTERVALS:		From ft. to ft. From ft. to ft.												
6 GROUT MATERIAL:		1 Neat cement 2 Cement grout 3 Bentonite 4 Other												
Grout intervals: From 5 ft. to 20 ft. From 160 ft. to 180 ft. From ft. to ft.														
What is the nearest source of possible contamination:		10 Livestock pens 14 Abandoned water well												
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? West		How many feet? 100												
FROM TO LITHOLOGIC LOG FROM TO PLUGGING INTERVALS														
0 7 Fine Sand														
7 30 Brown Sandy clay														
30 36 Fine to med Sand & gravel														
36 58 Brown clay														
58 59 Rock														
59 81 Gray clay														
81 123 Brown clay														
123 146 Fine to med Sand & gravel														
146 147 Hard Rock														
147 151 Fine to med Sand & gravel														
151 152 Hard Rock														
152 170 Fine to med Sand & gravel														
170 177 Brown clay														
177 194 Fine to med Sand & gravel														
194 214 Brown clay														
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) 8-2-96 and this record is true to the best of my knowledge and belief. Kansas														
Water Well Contractor's License No. 172 This Water Well Record was completed on (mo/day/yr) 3-3-10														
under the business name of Hoganwater Well Service by (signature) me														
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.														