

CORRECTION(S) TO WATER WELL RECORD (WWC-5)
(to rectify lacking or incorrect information)

Location listed as:

Section-Township-Range: _____

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

County: RENO
Location changed to:

12-23-6W

NW SW NE

Other changes: Initial statements: _____

Changed to: _____

Comments: WELL CONSTRUCTED ONLY - NOT PLUGGED. COMPLETION DATE
JUST PRIOR TO DATE WATER LEVEL MEASURED.

verification method: CALL TO DRILLER

initials: DS date: 3/21/06

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>Reno</u>		<u>NW 1/4 SW 1/4 NE 1/4</u>	<u>12</u>	<u>T 23 S</u>	<u>R 6 E/W</u>
Distance and direction from nearest town or city street address of well if located within city? <u>1224 Main St S.E. of Building Hutchinson Ks</u>					
2 WATER WELL OWNER: <u>KDHE</u>					
RR#, St. Address, Box #: <u>Furber Field Bldg 740</u>					
City, State, ZIP Code: <u>Topeka KS 66620-0001</u>					
<small>Board of Agriculture, Division of Water Resources Application Number:</small>					
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL <u>37.19</u> ft. ELEVATION: <u>1535±5</u>			
<p>1 Mile scale bar.</p>		Depth(s) Groundwater Encountered 1. <u>~15</u> ft. 2. _____ ft. 3. _____ ft.			
		WELL'S STATIC WATER LEVEL <u>14.31</u> ft. below land surface measured on mo/day/yr <u>06/04/97</u>			
		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 <u>13</u> in. to <u>37.0</u> ft., and _____ in. to _____ ft.			
WELL WATER TO BE USED AS: 1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below) 2 Irrigation 4 Industrial 7 Lawn and garden only <u>(10) Monitoring well</u> <u>14-20</u>					
Was a chemical/bacteriological sample submitted to Department? Yes _____ No _____; If yes, mo/day/yr sample was submitted _____ Water Well Disinfected? Yes _____ No <u>(No)</u>					
5 TYPE OF BLANK CASING USED:					
1 Steel		3 RMP (SR)		5 Wrought iron	
<u>(2) PVC</u>		4 ABS		6 Asbestos-Cement	
				7 Fiberglass	
Blank casing diameter <u>2</u> in. to <u>27</u> ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.				CASING JOINTS: Glued _____ Clamped _____	
Casing height above land surface <u>-0.3'</u> , weight _____ lbs./ft. Wall thickness or gauge No. _____				Welded _____ Threaded <u>(Threaded)</u>	
TYPE OF SCREEN OR PERFORATION MATERIAL:					
1 Steel		3 Stainless steel		5 Fiberglass	
2 Brass		4 Galvanized steel		6 Concrete tile	
				8 RMP (SR)	
				9 ABS	
				10 Asbestos-cement	
				11 Other (specify) _____	
				12 None used (open hole)	
SCREEN OR PERFORATION OPENINGS ARE:					
1 Continuous slot		<u>(3 Mill slot)</u>		5 Gauzed wrapped	
2 Louvered shutter		4 Key punched		6 Wire wrapped	
				7 Torch cut	
				8 Saw cut	
				9 Drilled holes	
				10 Other (specify) _____	
				11 None (open hole)	
SCREEN-PERFORATED INTERVALS: From <u>37.0</u> ft. to <u>27.0</u> ft., From _____ ft. to _____ ft. From _____ ft. to _____ ft., From _____ ft. to _____ ft.					
GRAVEL PACK INTERVALS: From <u>37.0</u> ft. to <u>25.0</u> ft., From _____ ft. to _____ ft. From _____ ft. to _____ ft., From _____ ft. to _____ ft.					
6 GROUT MATERIAL: <u>(1) Neat cement</u> 2 Cement grout <u>(3) Bentonite</u> 4 Other _____					
Grout Intervals: From <u>25.0</u> ft. to <u>21.0</u> ft., From <u>9.0</u> ft. to <u>1.0</u> ft., From _____ ft. to _____ ft.					
What is the nearest source of possible contamination:					
1 Septic tank		4 Lateral lines		7 Pit privy	
2 Sewer lines		5 Cess pool		8 Sewage lagoon	
3 Watertight sewer lines		6 Seepage pit		9 Feedyard	
				10 Livestock pens	
				11 Fuel storage	
				12 Fertilizer storage	
				13 Insecticide storage	
				14 Abandoned water well	
				15 Oil well/Gas well	
				<u>(16) Other (specify below)</u> <u>Former Dry Cleaner</u>	
Direction from well? _____ How many feet? <u>100'</u>					
FROM		TO		LITHOLOGIC LOG	
<u>0</u>		<u>3</u>		<u>Brown Clay</u>	
<u>3</u>		<u>40</u>		<u>Gravels & Sands</u>	
FROM		TO		PLUGGING INTERVALS	
<u>37</u>		<u>25</u>		<u>Bentonite</u>	
<u>25</u>		<u>21</u>		<u>Sands</u>	
<u>21</u>		<u>9</u>		<u>Bentonite</u>	
<u>9</u>		<u>1</u>		<u>Cement</u>	
<u>1</u>		<u>0</u>			
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) _____ and this record is true to the best of my knowledge and belief. Kansas					
Water Well Contractor's License No. <u>568</u> This Water Well Record was completed on (mo/day/yr) _____					
under the business name of <u>MAXS</u> by (signature) <u>[Signature]</u>					

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.

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