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

| Location listed as: | County: Harvey Location changed to: |
|--|--|
| Section-Township-Range: | 34-245-1W |
| Fraction (¼ ¼ ¼): | SE SW SE |
| Other changes: Initial statements: | County |
| Changed to: Harvey Cou | inty |
| Comments: | |
| verification method: Phone call to well cont | tractor, wellsite address, |
| area road map, and mapping | tool on KGS website - initials: DRL date: 9/20/2010 |
| submitted by: Kansas Geological Survey, Data Resources Library, 1930 C | · · · · · · · · · · · · · · · · · · · |

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.

| WATER WELL RE | CORD | Form W | WC-5 | Di | vision of Wate | r Resources App. No | o. L | | | |
|---|---------------------------|---|------------------------------|---|---------------------------|---|---------------------------------------|---|--|--|
| 1 LOCATION OF W | | Fraction 458 450 | 1 00 | | | Township No. | | | | |
| County: Soci | gurch | 1432 1/30 | 145E1/ | | | T 246) | | □E Ø W | | |
| Street/Rural Address | of Well Location; | if unknown, distance d | & direction | | | g System (GPS) in | | | | |
| Hom hearest town of | intersection: If at | owner's address, check | k liele [X]. | | | • | | | | |
| | | , | | Eleva | ation: | | (111 acc | illiai degrees) | | |
| A WATER WELL OF | WALED A | 1/1/2 | | Datun | <u>n</u> : 🔲 WGS 84 | 4, □ NAD 83, □ | NAD 27 | | | |
| 2 WATER WELL O | WNER: Sort | f Have. | , | | ction Method: | 5.4.1 | | , | | |
| City, State, ZIP Code | 30 g | Harris | on | | | ce/Model: | | | | |
| City, State, 211 Cour | 54 | lowick. | Ko | | | 3 m, ☐ 3-5 m, ☐ | | | | |
| 3 LOCATE WELL | | / | · | _ | | | | | | |
| WITH AN "X" IN | | COMPLETED WEL | | | | | a \ | | | |
| SECTION BOX: | Depth(s) Ground | lwater Encountered | | It. | (2) ££ | It. (| 3) / | It. | | |
| | WELL'S STATIC WATER LEVEL | | | | | | | | | |
| | ECT VIELD | | | | | | | | | |
| W NW NE | Bore Hole Diam | eter /.3 in. to . | | ft., and . | in. | to | ft. | | | |
| | WELL WATER | TO BE USED AS: | Public wa | iter suppl | ly 🔲 Ge | othermal I | njection v | vell | | |
| SW SE | | Feedlot | | | | | | ecify below) | | |
| | ⊠ Irrigation | | Domestic-la | ıwn & ga | rden | onitoring well | ••••• | | | |
| S | | bacteriological sample day/yr sample was sul | | | | Yes 🔼 No | | | | |
| 1 mile | | fected? 🛣 Yes 🗌 | | • | ••••• | | | | | |
| Z TOWNE OF CACING | | | | | | | | | | |
| 5 TYPE OF CASING | | | | | | ••••• | | | | |
| CASING JOINTS: Signed Clamped Welded Threaded Casing diameter in. to ft., Diameter in. to ft. | | | | | | | | | | |
| Casing height above l | and surface. 16 | in Weight | 160 | lbs./f | t Wall thic | kness or gauge No | 0 | 4 | | |
| TYPE OF SCREEN OR | | MATERIAL: | | | | | | | | |
| | ainless Steel | ₽VC | | Other (| Specify) | | | | | |
| ☐ Brass ☐ Grass ☐ Gra | | None used (open h | iole) | | | | | | | |
| | | | Torch cut | ∏ Dri | illed holes | ☐ None (open hole | e) | | | |
| ☐ Continuous slot ☐ Mill slot ☐ Gauze wrapped ☐ Torch cut ☐ Drilled holes ☐ None (open hole) ☐ Louvered shutter ☐ Key punched ☐ Wire wrapped ☐ Saw cut ☐ Other (specify) SCREEN-PERFORATED INTERVALS: From ft. to ft., From ft. to | | | | | | | | | | |
| SCREEN-PERFORATI | ED INTERVALS: | From3. | ft. to | ν.υ | ft., From | ft. 1 | ю | ft. | | |
| CD AVERY DAG | | From. 24 | ft. to | ········· | ft., From | ft. 1 | 0 | ft. | | |
| GRAVEL PAC | KINTERVALS: | FromFrom | ft. to | <i>O</i> | It., From | π. · | io to | It. | | |
| 6 GROUT MATERIA | L: Neat ceme | | | | | Rt. | | | | |
| 1 | n ft. to | TA . 1 | | | | | | | | |
| What is the nearest source | | _ | | | , | | | | | |
| Septic tank | | es Pit privy | Livestock | | Insecticide | | er (specify | below) | | |
| Sewer lines Watertight sewer | Cesspool | | ☐ Fuel stora ☐ Fertilizer | | ☐ Abandoned ☐ Oil well/ga | | | | | |
| Direction from well. | inies seepage p | T | | | ell | 35D/ | · · · · · · · · · · · · · · · · · · · | | | |
| FROM TO | LITHOLOG | * | FROM | TO | , | OG (cont.) or PLU | | | | |
| 02 3 | op soil | | | | | <u> </u> | | | | |
| 2 21 0 | leur | | | | | | | | | |
| 21 24 h | nd Sar | nd | | | | | | | | |
| 24 24 00 | neen S | lale | | | | | | | | |
| 37 90 9 | blue S | hali | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | . | | | | | | *************************************** | | |
| | | | 1 | | | | | | | |
| 7 CONTRACTOR'S O | R LANDOWNER | 'S CERTIFICATIO | N: This wa | ter well v | was 🗖 constr | ucted. Treconstr | ucted or | nlugged | | |
| 7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was a constructed, a reconstructed, or plugged under my jurisdiction and was completed on (mo/day/year) | | | | | | | | | | |
| Kansas Water Well Contractor's License No | | | | | | | | | | |
| under the business name | of Che | e Levill | ing | by (s | signature)(| Helley | , | | | |
| INSTRUCTIONS: Use type | | | | | | | | | | |
| (white, blue, pink) to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send one copy to WATER WELL OWNER and retain one for your records. Include fee of \$5.00 for each constructed well. Visit us at | | | | | | | | | | |
| http://www.kdheks.gov/waterwell/index.html. | | | | | | | | | | |