

County: Stafford Fraction: NW, NE, NW, SW Sec. 18 T. 24 S R. 12 W

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

Owner: Tom McMillan 56 ft Livestock well

If location corrected, was listed as:

Location changed to:

Section-Township-Range: _____

Fraction (¼ calls): NE, SE, SW

NW, NE, NW, SW

Other changes: Initial statements: Insufficient & incorrect location description provided.

Changed to: 5 mi W of Stafford on Hwy 50 then N on driveway to near to middle of Sec. 18, then W 1,200 ft to middle of pasture.

Comments: _____

Verification method: Information provided by water well contractor, and used STR Finder.

Initials: PKC Date: 10/31/21

Submitted by: Kansas Geological Survey, Data Resources Library, 1930 Constant Ave., Lawrence, KS 66047-3724
 Kansas Dept. of Health & Environment, Bureau of Water, 1000 SW Jackson, Suite 420, Topeka, KS 66612-1367

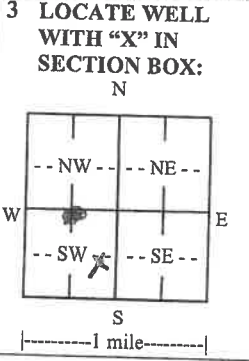
WATER WELL RECORD Form WWC-5

Original Record Correction Change in Well Use

Division of Water Resources App. No. Well ID

1 LOCATION OF WATER WELL:
 County: Stafford Fraction NE 1/4 SE 1/4 SW 1/4 Section Number 18 Township Number T 24 S Range Number R 12 E W

2 WELL OWNER: Last Name: McMillan First: Tom
 Business: _____
 Address: 344 E Hwy 50
 Address: _____
 City: Stafford State: KS ZIP: 67578
 Street or Rural Address where well is located (if unknown, distance and direction from nearest town or intersection): If at owner's address, check here:
West of Stafford on Hwy 50 for 4 1/2 miles to NE corner. Go south to driveway + west to location.



4 DEPTH OF COMPLETED WELL: 516 ft.
 Depth(s) Groundwater Encountered: 1) ft.
 2) ft. 3) ft., or 4) Dry Well
 WELL'S STATIC WATER LEVEL: 24 ft.
 below land surface, measured on (mo-day-yr)
 above land surface, measured on (mo-day-yr)
 Pump test data: Well water was ft. after hours pumping gpm
 Well water was ft. after hours pumping gpm
 Estimated Yield: 100 gpm
 Bore Hole Diameter: 10 7/8 in. to ft. and in. to ft.

5 Latitude: (decimal degrees)
Longitude: (decimal degrees)
 Horizontal Datum: WGS 84 NAD 83 NAD 27
 Source for Latitude/Longitude:
 GPS (unit make/model: (WAAS enabled? Yes No)
 Land Survey Topographic Map
 Online Mapper:
6 Elevation: ft. Ground Level TOC
 Source: Land Survey GPS Topographic Map
 Other

- 7 WELL WATER TO BE USED AS:**
- | | | | | | | | | | | | | |
|---|--|-------------------------------------|--|--|---|---|---|---|--|---|---|---|
| 1. Domestic:
<input type="checkbox"/> Household
<input type="checkbox"/> Lawn & Garden
<input checked="" type="checkbox"/> Livestock | 2. <input type="checkbox"/> Irrigation | 3. <input type="checkbox"/> Feedlot | 4. <input type="checkbox"/> Industrial | 5. <input type="checkbox"/> Public Water Supply: well ID | 6. <input type="checkbox"/> Dewatering: how many wells? | 7. <input type="checkbox"/> Aquifer Recharge: well ID | 8. <input type="checkbox"/> Monitoring: well ID | 9. Environmental Remediation: well ID
<input type="checkbox"/> Air Sparge <input type="checkbox"/> Soil Vapor Extraction
<input type="checkbox"/> Recovery <input type="checkbox"/> Injection | 10. <input type="checkbox"/> Oil Field Water Supply: lease | 11. Test Hole: well ID
<input type="checkbox"/> Cased <input type="checkbox"/> Uncased <input type="checkbox"/> Geotechnical | 12. Geothermal: how many bores?
a) Closed Loop <input type="checkbox"/> Horizontal <input type="checkbox"/> Vertical
b) Open Loop <input type="checkbox"/> Surface Discharge <input type="checkbox"/> Inj. of Water | 13. <input type="checkbox"/> Other (specify): |
|---|--|-------------------------------------|--|--|---|---|---|---|--|---|---|---|

Was a chemical/bacteriological sample submitted to KDHE? Yes No
 Water well disinfected? Yes No
 If yes, date sample was submitted:

8 TYPE OF CASING USED: Steel PVC Other CASING JOINTS: Glued Clamped Welded Threaded
 Casing diameter 5 in. to ft., Diameter in. to ft., Diameter in. to ft.
 Casing height above land surface 24 in. Weight lbs./ft. Wall thickness or gauge No.

TYPE OF SCREEN OR PERFORATION MATERIAL:
 Steel Stainless Steel Fiberglass PVC Other (Specify)
 Brass Galvanized Steel Concrete tile None used (open hole)

SCREEN OR PERFORATION OPENINGS ARE:
 Continuous Slot Mill Slot Gauze Wrapped Torch Cut Drilled Holes Other (Specify)
 Louvered Shutter Key Punched Wire Wrapped Saw Cut None (Open Hole)

SCREEN-PERFORATED INTERVALS: From 516 ft. to 416 ft., From ft. to ft., From ft. to ft.
GRAVEL PACK INTERVALS: From ft. to ft., From ft. to ft., From ft. to ft.

9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other
 Grout Intervals: From 21 ft. to ft., From ft. to ft., From ft. to ft.

Nearest source of possible contamination:
 Septic Tank Lateral Lines Pit Privy Livestock Pens Insecticide Storage
 Sewer Lines Cess Pool Sewage Lagoon Fuel Storage Abandoned Water Well
 Watertight Sewer Lines Seepage Pit Feedyard Fertilizer Storage Oil Well/Gas Well
 Other (Specify)

Direction from well? None Distance from well? ft.

10 FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
0	8	Sandy Top Soil			
8	18	Tan Clay			
18	44	Tan Sand Fine			
44	52	Coarse Sand			
52	516	Tan Clay			
Notes:					

11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, or plugged under my jurisdiction and was completed on (mo-day-year) 8/5/21 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 672. This Water Well Record was completed on (mo-day-year) 8/17/21 under the business name of Crawdie Water Well Service. Signature: _____

Mail 1 white copy along with a fee of \$5.00 for each constructed well to: Kansas Department of Health and Environment, Bureau of Water, GWTS Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Mail one to Water Well Owner and retain one for your records. Telephone 785-296-5524. Visit us at <http://www.kdheks.gov/waterwell/index.html> KSA 82a-1212