

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

(to rectify lacking or incorrect information)

County: Harvey

Location listed as:

Location changed to:

Section-Township-Range: 2-24 S-2 W

2-24 S-2 W

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

NE NE NW

Other changes: Initial statements: \_\_\_\_\_

Changed to: \_\_\_\_\_

Comments: \_\_\_\_\_

verification method: Well address, city street map, mapping tool  
on KGS website, and original construction records  
for these wells. initials: DRJ date: 8/25/2006

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: <b>Harvey</b>		<b>NW<sup>1</sup>/<sub>4</sub> NE<sup>1</sup>/<sub>4</sub> NE<sup>1</sup>/<sub>4</sub></b>	<b>2</b>	<b>24S</b>	<b>2</b> <span style="float: right;">EW</span>																											
Distance and direction from nearest town or city street address of well if located within city? <b>520 W 6th Street</b>																																
2																																
WATER WELL OWNER: <b>USD 440</b>																																
RR #, St. Address, Box #: <b>520 W 6th Street</b>																																
City, State, ZIP Code: <b>Halstead, KS 67056</b>																																
Board of Agriculture, Division of Water Resources Application Number:																																
3		4																														
MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:		DEPTH OF WELL <b>26.73</b> ft.																														
<div style="text-align: center;">N</div> <table border="1" style="width: 100%; height: 100%; border-collapse: collapse;"><tr><td style="width: 50%; text-align: center;">NW</td><td style="width: 50%; text-align: center;">NE</td></tr><tr><td style="width: 50%; text-align: center;">SW</td><td style="width: 50%; text-align: center;">SE</td></tr></table> <div style="text-align: center;">S</div>		NW	NE	SW	SE	WELL'S STATIC WATER LEVEL <b>12.43</b> ft.																										
		NW	NE																													
		SW	SE																													
		WELL WAS USED AS:																														
<table style="width: 100%;"><tr><td>1 Domestic</td><td>5 Public Water Supply</td><td>9 Dewatering</td></tr><tr><td>2 Irrigation</td><td>6 Oil Field Water Supply</td><td><input checked="" type="radio"/> 10 Monitoring Well</td></tr><tr><td>3 Feedlot</td><td>7 Domestic (Lawn &amp; Garden)</td><td>11 Injection Well</td></tr><tr><td>4 Industrial</td><td>8 Air Conditioning</td><td>12 Other .....</td></tr></table>				1 Domestic	5 Public Water Supply	9 Dewatering	2 Irrigation	6 Oil Field Water Supply	<input checked="" type="radio"/> 10 Monitoring Well	3 Feedlot	7 Domestic (Lawn & Garden)	11 Injection Well	4 Industrial	8 Air Conditioning	12 Other .....																	
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Was a chemical / bacteriological sample submitted to Department? Yes ..... No <input checked="" type="checkbox"/> <b>X</b>																																
If yes, mo/day/yr sample was submitted .....																																
Water Well Disinfected: Yes ..... No <input checked="" type="checkbox"/> <b>X</b>																																
5																																
TYPE OF BLANK CASING USED:																																
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Blank casing diameter <b>2</b> in. Was casing pulled? Yes <input checked="" type="checkbox"/> <b>X</b> No ..... If yes, how much <b>all</b>																																
Casing height above or below land surface <b>2</b> in.																																
6																																
GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout <input checked="" type="radio"/> 3 Bentonite 4 Other .....																																
Grout Plug Intervals: From <b>20</b> ft. to <b>0</b> ft., From ..... ft. to ..... ft., From ..... to ..... ft.																																
What is the nearest source of possible contamination:																																
<table style="width: 100%;"><tr><td>1 Septic tank</td><td>6 Seepage pit</td><td>11 Fuel storage</td><td>16 Other (specify below)</td></tr><tr><td>2 Sewer lines</td><td>7 Pit privy</td><td>12 Fertilizer storage</td><td></td></tr><tr><td><input checked="" type="radio"/> 3 Watertight sewer lines</td><td>8 Sewage lagoon</td><td>13 Insecticide storage</td><td></td></tr><tr><td>4 Lateral lines</td><td>9 Feedyard</td><td>14 Abandoned water well</td><td></td></tr><tr><td>5 Cess pool</td><td>10 Livestock pens</td><td>15 Oil well/Gas well</td><td></td></tr></table>						1 Septic tank	6 Seepage pit	11 Fuel storage	16 Other (specify below)	2 Sewer lines	7 Pit privy	12 Fertilizer storage		<input checked="" type="radio"/> 3 Watertight sewer lines	8 Sewage lagoon	13 Insecticide storage		4 Lateral lines	9 Feedyard	14 Abandoned water well		5 Cess pool	10 Livestock pens	15 Oil well/Gas well								
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Direction from well? <b>Due West</b> How many feet? <b>Within 200ft</b>																																
<table border="1" style="width: 100%; border-collapse: collapse;"><thead><tr><th style="width: 15%;">FROM</th><th style="width: 15%;">TO</th><th style="width: 70%;">PLUGGING MATERIALS</th></tr></thead><tbody><tr><td>20</td><td>0</td><td>Bentonite</td></tr><tr><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td></tr></tbody></table>						FROM	TO	PLUGGING MATERIALS	20	0	Bentonite																					
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7																																
CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) <b>6/7/05</b> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <b>665</b> This Water Well Record was completed on (mo/day/year) <b>6/20/05</b> under the business name of <b>Pratt Well Environmental</b> by (signature) <i>John Gill</i>																																
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, Geology Section, 1000 SW Jackson St., Ste. 420, Topeka, Kansas 66612-1367. Telephone: 785/296-5522. Send one to Water Well Owner and retain one for your records.																																