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: | 2-245-24 | | | | | | | |
| Fraction (1/4 1/4 1/4): | SE NW SE | | | | | | | |
| Other changes: Initial statements: | | | | | | | | |
| Changed to: Harvey County | | | | | | | | |
| Comments: | | | | | | | | |
| verification method: <u>Legal description</u> , well on internet, and mapping tool \$ | address & city street map aerial photo on 1565 website initials: ARL date: 11/10/2005 | | | | | | | |

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 REC | CORD | Form WWC | -5 | Division of | Water Resourc | es; App. No. 🏻 | | |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------|---------------------------|--------------------|----------------------|---------------------------------|--------------------|---------------------------------------|--|
| 1 LOCATION OF WA | TER WELL: | Fraction | | Section Numb | per Towns | hip Number | Range Number | |
| County: Secret | WICK | SE 1/4 NW1/4 S | SE 1/4 | | <u>т ач</u> | | $R \supseteq E/\emptyset$ | |
| | from nearest town or ci | ty street address of w | ell if | Global Position | oning Systen | s (decimal de | grees, min. of 4 digits) | |
| located within city? Latitude: | | | | | | | | |
| 1435 (the | stnut | | | Longitude: _ | | | | |
| 2 WATER WELL OW RR#, St. Address, Box | NER-JUSC 60 | irnica | | Elevation: | | | · · · · · · · · · · · · · · · · · · · | |
| RR#, St. Address, Box | (# 1435 Ch | estnut | | Datum: | | | | |
| City, State, ZIP Code | Halstea | - KS | | Data Collect | ion Method: | | | |
| 3 LOCATE WELL'S | 4 DEPTH OF COMP | | 120 | | | | | |
| LOCATION | | | , | | | | | |
| WITH AN "X" IN | Depth(s) Groundwater | Encountered (1). | 26. | ft. (2). | | . ft. (3) | | |
| SECTION BOX: | Depth(s) Groundwater Encountered (1) | | | | | | | |
| N | Pump test data: Well water wasft. after hours pumping gpm | | | | | | | |
| | Est. Yieldgpn | n: Well water was | | ft. after | hou | rs pumping | gpm | |
| NW NE | WELL WATER TO E | BE USED AS: 5 Pub | lic water s | supply 8 | Air condition | ning 11 Inje | ection well | |
| W E | 1 Domestic 3 Fee | edlot 6 Oil field | d water su | pply 9 | Dewatering | 12 Otl | her (Specify below) | |
| | 2 Irrigation 4 Inc | lustrial Domest | ic (lawn d | k garden) 10 | Monitoring v | vell | | |
| sw -Xse | | | | | | | | |
| | Was a chemical/bacter Sample was submitted | riological sample sub | mitted to l | Department? ` | Yes | No 4 ; | If yes, mo/day/yrs | |
| | Sample was submitted | l | Wate | r well disinfect | ted? Yes | No | | |
| S | | | | | | | | |
| 5 TYPE OF CASING U | SED: 5 Wrought | Iron 8 Con | crete tile | CA | SING IOINT | S: Glued 🗴 | Clamped | |
| Steel 3 RMI | <i>-</i> | | | below) | | | | |
| (1PVC) 4 ABS | 7 Fiberglas | s contone | i (speeily | 001011) | | | | |
| Blank casing diameter Casing height above land | | ft Diameter | i | n to | ft Diamete | r | in to ft | |
| Casing height above land | surface | in weight | \mathcal{O} | lhs /ft Wal | tt., Blamete Il thickness or | guage No | 26 | |
| TYPE OF SCREEN OR I | PERFORATION MATE | FRIAL | | 105.710. *** 41 | ii tiiiekiiess oi | gaage 110 | | |
| | nless Steel 5 Fiber | | 9 4 | ABS | 11 Oth | er (Specify) | | |
| | vanized Steal 6 Cond | | | Asbestos-Ceme | ent 12 Nor | e used (open | hole) | |
| SCREEN OR PERFORA | TION OPENINGS ARI | E: | , | isousius cume | 121,01 | opun (opun | | |
| | 3 Mill slot) 5. C | | Torch cut | 9 Drilled h | oles 11 l | None (open h | ole) | |
| | 4 Key punched 6 V | | | | | | | |
| SCREEN-PERFORATED | INTERVALS: From. | | 120 | D ft From | m | ft. to | ft. | |
| | | | | | | | | |
| GRAVEL PACK | From. INTERVALS: From. | 24 ft. to | 12 | O ft., From | m | ft. to | ft. | |
| | | ft. to | | | | | | |
| | | | | | | | | |
| 6 GROUT MATERIAL Grout Intervals: Fro | : 1 Neat cement 2 | Cement grout (3 Be | entonite' | 4 Other | | | | |
| Grout intervals. | IL. 10 | 7.7 | | ft. to | ft., From | | ft. toft. | |
| What is the nearest source | | | | | | | | |
| 1 Septic tank | 4 Lateral lines | | 10 Livesto | • | 3 Insecticide | | 16 Other (specify | |
| 2 Sewer lines | 5 Cess pool | | 11 Fuel st | - | 4 Abandoned | | below) | |
| Watertight sewer | lines 6 Seepage pit | • | | ~ . | 5 Oil wll/gas | well | | |
| Direction from well? | - C | | | y feet? 25 | | | | |
| FROM TO | LITHOLOGIC | CLOG | FROM | ТО | PLU: | GGING INTI | ERVALS | |
| $Q \mid Z \mid TO$ | 05:0il | | | | | | | |
| 2 2 2 | au , | | | | | | | |
| 21. 44 fm | e Sand | | | | | | | |
| 44 97 0 | au , | | | | | | | |
| 47 120 ma | d Sand | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | 1 | | | | | |
| | | | | | | | 5 t : | |
| | | | | | | | | |
| 7 CONTRACTOR'S OF | R LANDOWNED'S C | FRTIFICATION | This water | r well was (A | ometructed | (2) reconstru | cted or (3) plugged | |
| 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) | | | | | | | | |
| Kansas Water Well Contractor's License No. 2.1 This Water Well Record was completed on (mo/day/year) | | | | | | | | |
| Under the business name | of // 7 | \ .11. | | y (signature) | | , day, year) | | |
| | - CHUSE I | Tilling | | · ` · · · | K. Cha | re | | |
| INSTRUCTIONS: Use typewri | ter or ball point pen. <u>PLEASI</u> | E PRESS FIRMLY and PRI | <u>NT</u> clearly. | Please fill in blank | ks, underline or | vircle the correct | answers. Send top three | |
| copies 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 to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well. | | | | | | | | |
| 2.0 3322. Delia one to WATER | LLL O WITLIN and I ciain | one for your records. Tee | J. ψ.J.OU 101 | Cach Constructed W | , A11. | | | |