

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

(to rectify lacking or incorrect information)

LOCATION OF WATER WELL: County: <u>Harvey</u>	Fraction <u>1/4</u> <u>SE</u> <u>1/4</u> <u>SE</u> <u>1/4</u> <u>SE</u> <u>1/4</u>	Section <u>17</u>	Township T <u>24</u> S	Range R <u>3</u> ☐ E ☒ W
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Owner: Equus Beds GMD 2

Location was listed as:

Sec. 20 T 24 S R 3 ☐E ☒W

Fraction: NE NE NE NE

Location changed to:

Sec. 17 T 24 S R 3 ☐E ☒W

Fraction: SE SE SE

Other changes: Initial statements: _____

Changed to: _____

Comments: Also added Well ID. as EB 11 B

Verification method: Per Equus Beds GMD 2 and USGS staff by latitude/longitude

initials: DRL date: 03-09-2016

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.

ID: EB 11 B

WATER WELL RECORD

Form WWC-5

Division of Water Resources App. No.

1 LOCATION OF WATER WELL: County: Harvey Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here ☐ . 5 mile south of Burrton, Ks.	Fraction NE ¼ NE ¼ NE ¼ NE ¼	Section Number 20	Township No. T 24 S	Range Number R 3 ☐ E ☒ W
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2 WATER WELL OWNER: Equus Beds GMD 2 RR#, Street Address, Box #: 313 Spruce Street City, State, ZIP Code : Halstead, Kansas 67056	Global Positioning System (GPS) information: Latitude: 37.95607 (in decimal degrees) Longitude: 097.66574 (in decimal degrees) Elevation: 1434 Datum: ☐ WGS 84, ☐ NAD 83, ☒ NAD 27 Collection Method: ☒ GPS unit (Make/Model: Garmin csx) ☐ Digital Map/Photo, ☐ Topographic Map, ☐ Land Survey Est. Accuracy: ☐ <3 m, ☒ 3-5 m, ☐ 5-15 m, ☐ >15 m
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3 LOCATE WELL WITH AN "X" IN SECTION BOX: N S -----1 mile-----	4 DEPTH OF COMPLETED WELL 85 Depth(s) Groundwater Encountered (1)..... ft. (2)..... ft. (3)..... ft. WELL'S STATIC WATER LEVEL 8..... ft. below land surface measured on mo/day/yr. 8-13-09..... 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 6 1/2..... in. to 85..... ft., and in. to ft. WELL WATER TO BE USED AS: ☐ Public water supply ☐ Geothermal ☐ Injection well ☐ Domestic ☐ Feedlot ☐ Oil field water supply ☐ Dewatering ☒ Other (Specify below) ☐ Irrigation ☐ Industrial ☐ Domestic-lawn & garden ☐ Monitoring well ☐ Observation well Was a chemical/bacteriological sample submitted to Department? ☐ Yes ☒ No If yes, mo/day/yr sample was submitted..... Water well disinfected? ☐ Yes ☒ No
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5 TYPE OF CASING USED: ☐ Steel ☒ PVC ☒ Other Galvanized CASING JOINTS: ☐ Glued ☐ Clamped ☐ Welded ☒ Threaded Casing diameter 2..... in. to 7..... ft., Diameter 2..... in. to 75..... ft., Diameter in. to ft. Casing height above land surface 36..... in., Weight SCH 40..... lbs./ft., Wall thickness or gauge No. 154..... TYPE OF SCREEN OR PERFORATION MATERIAL: ☐ Steel ☐ Stainless Steel ☒ PVC ☐ Other (Specify) ☐ Brass ☐ Galvanized Steel ☐ None used (open hole) SCREEN OR PERFORATION OPENINGS ARE: ☐ 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 75..... ft. to 85..... ft., From ft. to ft. GRAVEL PACK INTERVALS: From 85..... ft. to 70..... ft., From ft. to ft. From ft. to ft., From ft. to ft.	6 GROUT MATERIAL: ☒ Neat cement ☐ Cement grout ☒ Bentonite ☐ Other Grout Intervals: From 70..... ft. to 67..... ft., From 67..... ft. to 6..... ft., From 6..... ft. to 0..... ft. What is the nearest source of possible contamination: ☐ Septic tank ☐ Lateral lines ☐ Pit privy ☐ Livestock pens ☐ Insecticide storage ☒ Other (specify below) ☐ Sewer lines ☐ Cesspool ☐ Sewage lagoon ☐ Fuel storage ☐ Abandoned water well ☐ Watertight sewer lines ☐ Seepage pit ☐ Feedyard ☐ Fertilizer storage ☐ Oil well/gas well none Direction from well Distance from well
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FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
0	2	Top Soil			
2	6	Tan clay			
6	20	Med. to coarse sand			
20	50	Medium sand			
50	60	Fine-med. snd. w/strks gray clay			
60	68	Fine to small sand			
68	78	Tan clay-fine sand			
78	85	Fine to small sand			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was ☒ constructed, ☐ reconstructed, or ☐ plugged under my jurisdiction and was completed on (mo/day/year) 8-13-09..... and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 134..... This Water Well Record was completed on (mo/day/year) 8-18-09..... under the business name of Rosencrantz-Bemis Ent. by (signature) <i>Jessie Dada</i>	INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks and check the correct answers. Send three copies (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 .
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