

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

(to rectify lacking or incorrect information)

County: Finney

Location listed as:

Section-Township-Range: 23-24S-33W

Fraction (  $\frac{1}{4}$   $\frac{1}{4}$   $\frac{1}{4}$  ): None Given

Location changed to:

23-24S-33W

W2 SW NW SE

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

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

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

verification method: well site address, area road map, and  
mapping tool & aerial photos on KGS website.

initials: DPF date: 12/4/2009

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 RECORD

## Form WWC-5

Division of Water Resources App. No.

<b>1 LOCATION OF WATER WELL:</b> County: Finney	Fraction <div style="display: flex; justify-content: space-around;"> <span>1/4</span> <span>1/4</span> <span>1/4</span> <span>1/4</span> </div>	Section Number 23	Township No. T 24 S	Range Number R 33 <input type="checkbox"/> E <input checked="" type="checkbox"/> W
Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here <input checked="" type="checkbox"/> 2775 Sunset Terrace Garden City, KS 67846-Lot 21 Block 4 (Sagebrush Estates)		<b>Global Positioning System (GPS) information:</b> Latitude: ..... (in decimal degrees) Longitude: ..... (in decimal degrees) Elevation: ..... Datum: <input type="checkbox"/> WGS 84, <input type="checkbox"/> NAD 83, <input type="checkbox"/> NAD 27 Collection Method: <input type="checkbox"/> GPS unit (Make/Model: .....) <input type="checkbox"/> Digital Map/Photo, <input type="checkbox"/> Topographic Map, <input type="checkbox"/> Land Survey Est. Accuracy: <input type="checkbox"/> <3 m, <input type="checkbox"/> 3-5 m, <input type="checkbox"/> 5-15 m, <input type="checkbox"/> >15 m		
<b>2 WATER WELL OWNER:</b> Josh Noel RR#, Street Address, Box #: 2775 Sunset Terrace City, State, ZIP Code : Garden City, KS 67846				

<b>3 LOCATE WELL WITH AN "X" IN SECTION BOX:</b> <div style="text-align: center;">N</div> <table border="1" style="width: 100%; height: 100px; 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> <div style="text-align: center;">-----1 mile-----</div>	NW	NE	SW	SE	<b>4 DEPTH OF COMPLETED WELL</b> 328 ..... ft. Depth(s) Groundwater Encountered (1) 135' 9" ..... ft. (2) ..... ft. (3) ..... ft. WELL'S STATIC WATER LEVEL 135' 9" ..... ft. below land surface measured on mo/day/yr. .... Pump test data: Well water was ..... ft. after ..... hours pumping ..... gpm EST. YIELD 100 ..... gpm. Well water was ..... ft. after ..... hours pumping ..... gpm Bore Hole Diameter 10 ..... in. to 328 ..... ft., and ..... in. to ..... ft. WELL WATER TO BE USED AS: <input type="checkbox"/> Public water supply <input type="checkbox"/> Geothermal <input type="checkbox"/> Injection well <input checked="" type="checkbox"/> Domestic <input type="checkbox"/> Feedlot <input type="checkbox"/> Oil field water supply <input type="checkbox"/> Dewatering <input type="checkbox"/> Other (Specify below) <input type="checkbox"/> Irrigation <input type="checkbox"/> Industrial <input type="checkbox"/> Domestic-lawn & garden <input type="checkbox"/> Monitoring well ..... Was a chemical/bacteriological sample submitted to Department? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, mo/day/yr sample was submitted ..... Water well disinfected? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
NW	NE				
SW	SE				

<b>5 TYPE OF CASING USED:</b> <input type="checkbox"/> Steel <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Other ..... <b>CASING JOINTS:</b> <input checked="" type="checkbox"/> Glued <input type="checkbox"/> Clamped <input type="checkbox"/> Welded <input type="checkbox"/> Threaded Casing diameter 5 ..... in. to 328 ..... ft., Diameter ..... in. to ..... ft. Casing height above land surface 12 ..... in., Weight 200 ..... lbs./ft., Wall thickness or gauge No. SDR21 ..... <b>TYPE OF SCREEN OR PERFORATION MATERIAL:</b> <input type="checkbox"/> Steel <input type="checkbox"/> Stainless Steel <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Other (Specify) ..... <input type="checkbox"/> Brass <input type="checkbox"/> Galvanized Steel <input type="checkbox"/> None used (open hole) <b>SCREEN OR PERFORATION OPENINGS ARE:</b> <input type="checkbox"/> Continuous slot <input type="checkbox"/> Mill slot <input type="checkbox"/> Gauze wrapped <input type="checkbox"/> Torch cut <input type="checkbox"/> Drilled holes <input type="checkbox"/> None (open hole) <input type="checkbox"/> Louvered shutter <input type="checkbox"/> Key punched <input type="checkbox"/> Wire wrapped <input checked="" type="checkbox"/> Saw cut <input type="checkbox"/> Other (specify) ..... <b>SCREEN-PERFORATED INTERVALS:</b> From 288 ..... ft. to 328 ..... ft., From ..... ft. to ..... ft. <b>GRAVEL PACK INTERVALS:</b> From 30 ..... ft. to 192 ..... ft., From ..... ft. to ..... ft. From 202 ..... ft. to 328 ..... ft., From ..... ft. to ..... ft.	FROM TO LITHOLOGIC LOG 0 2 Top Soil 2 14 Coarse Sand & Gravel 14 62 Brown Clay 62 90 Brown Clay, Coarse Sand Streaks 90 102 Fine to Medium Sand 102 180 Brown Sandy Clay 180 202 Coarse Sand 202 218 Brown Clay, Cem. Sand, Few Loose Sand Streaks 218 273 Med. to Coarse Sand, Loose
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<b>6 GROUT MATERIAL:</b> <input type="checkbox"/> Neat cement <input type="checkbox"/> Cement grout <input checked="" type="checkbox"/> Bentonite <input type="checkbox"/> Other ..... Grout Intervals: From 5 ..... ft. to 30 ..... ft., From 200 ..... ft. to 218 ..... ft., From ..... ft. to ..... ft. What is the nearest source of possible contamination: <input checked="" type="checkbox"/> Septic tank <input type="checkbox"/> Lateral lines <input type="checkbox"/> Pit privy <input type="checkbox"/> Livestock pens <input type="checkbox"/> Insecticide storage <input type="checkbox"/> Other (specify below) <input type="checkbox"/> Sewer lines <input type="checkbox"/> Cesspool <input type="checkbox"/> Sewage lagoon <input type="checkbox"/> Fuel storage <input type="checkbox"/> Abandoned water well <input type="checkbox"/> Watertight sewer lines <input type="checkbox"/> Seepage pit <input type="checkbox"/> Feedyard <input type="checkbox"/> Fertilizer storage <input type="checkbox"/> Oil well/gas well ..... Direction from well East ..... Distance from well 80' .....	FROM TO LITHO. LOG (cont.) or PLUGGING INTERVALS 273 279 Cemented Sand 279 292 Coarse Sand, Small Gravel, Cem. Str 292 302 Cem. Sand, Brown Flaky Clay Mix 302 325 Coarse Sand, Loose 325 328 Light Yellow Soapstone
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FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
0	2	Top Soil	273	279	Cemented Sand
2	14	Coarse Sand & Gravel	279	292	Coarse Sand, Small Gravel, Cem. Str
14	62	Brown Clay	292	302	Cem. Sand, Brown Flaky Clay Mix
62	90	Brown Clay, Coarse Sand Streaks	302	325	Coarse Sand, Loose
90	102	Fine to Medium Sand	325	328	Light Yellow Soapstone
102	180	Brown Sandy Clay			
180	202	Coarse Sand			
202	218	Brown Clay, Cem. Sand, Few Loose Sand			
		Streaks			
218	273	Med. to Coarse Sand, Loose			

<b>7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:</b> This water well was <input checked="" type="checkbox"/> constructed, <input type="checkbox"/> reconstructed, or <input type="checkbox"/> plugged under my jurisdiction and was completed on (mo/day/year) 10/1/09 ..... and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 532 ..... This Water Well Record was completed on (mo/day/year) 10/27/09 ..... under the business name of Midwest Well & Pump, Inc. .... by (signature) <i>[Signature]</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 <a href="http://www.kdheks.gov/waterwell/index.html">http://www.kdheks.gov/waterwell/index.html</a> .
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