

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

(to rectify lacking or incorrect information)

County: Kearny

**Location listed as:**

Section-Township-Range: 22-265-36 W

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

**Location changed to:**

27-245-36 W

N2 NE

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

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

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

verification method: Attached site location map, and mapping tool  
on KGS website.

initials: ORL date: 9/18/2007

1 LOCATION OF WATER WELL: County: <u>Kearney</u>	Fraction <u>SE</u> 1/4 <u>NW</u> 1/4 <u>NE</u> 1/4	Section Number <u>22</u>	Township Number T <u>26</u> S	Range Number R <u>36</u> E <u>(W)</u>
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Distance and direction from nearest town or city street address of well if located within city?  
Kansas Street

2 WATER WELL OWNER: Farmers Cooperative  
 RR#, St. Address, Box #: 200 N. Main  
 City, State, ZIP Code: Lakin, KS.  
 Board of Agriculture, Division of Water Resources  
 Application Number:

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4 DEPTH OF COMPLETED WELL: <u>20</u> ft. ELEVATION: _____
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Depth(s) Groundwater Encountered 1. 15 ft. 2. \_\_\_\_\_ ft. 3. \_\_\_\_\_ ft.

WELL'S STATIC WATER LEVEL 15.64 ft. below TOC measured on mo/day/yr 11-9-93

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 7.5/8 in. to 20 ft., and \_\_\_\_\_ in. to \_\_\_\_\_ ft.

WELL WATER TO BE USED AS:

5 Public water supply	8 Air conditioning	11 Injection well
1 Domestic	3 Feedlot	6 Oil field water supply
2 Irrigation	4 Industrial	7 Lawn and garden only
		<u>10</u> Monitoring well

Was a chemical/bacteriological sample submitted to Department? Yes \_\_\_\_\_ No  \_\_\_\_\_; If yes, mo/day/yr sample was submitted \_\_\_\_\_

Water Well Disinfected? Yes \_\_\_\_\_ No  \_\_\_\_\_

5 TYPE OF BLANK CASING USED:

1 Steel	3 RMP (SR)	5 Wrought iron	8 Concrete tile	CASING JOINTS: Glued _____ Clamped _____
<u>2</u> PVC	4 ABS	6 Asbestos-Cement	9 Other (specify below)	Welded _____
		7 Fiberglass		Threaded <input checked="" type="checkbox"/>

Blank casing diameter 2 in. to 10 ft., Dia \_\_\_\_\_ in. to \_\_\_\_\_ ft., Dia \_\_\_\_\_ in. to \_\_\_\_\_ ft.

Casing height above land surface 0 in., weight \_\_\_\_\_ lbs./ft. Wall thickness or gauge No. Sch. 40

TYPE OF SCREEN OR PERFORATION MATERIAL:

1 Steel	3 Stainless steel	5 Fiberglass	<u>7</u> PVC	10 Asbestos-cement
2 Brass	4 Galvanized steel	6 Concrete tile	8 RMP (SR)	11 Other (specify) _____
			9 ABS	12 None used (open hole)

SCREEN OR PERFORATION OPENINGS ARE:

1 Continuous slot	<u>3</u> Mill slot	5 Gauzed wrapped	8 Saw cut	11 None (open hole)
2 Louvered shutter	4 Key punched	6 Wire wrapped	9 Drilled holes	
		7 Torch cut	10 Other (specify) _____	

SCREEN-PERFORATED INTERVALS: From 10 ft. to 20 ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

GRAVEL PACK INTERVALS: From 8.5 ft. to 20 ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other \_\_\_\_\_

Grout Intervals: From 0 ft. to 6.5 ft., From 6.5 ft. to 8.5 ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

What is the nearest source of possible contamination:

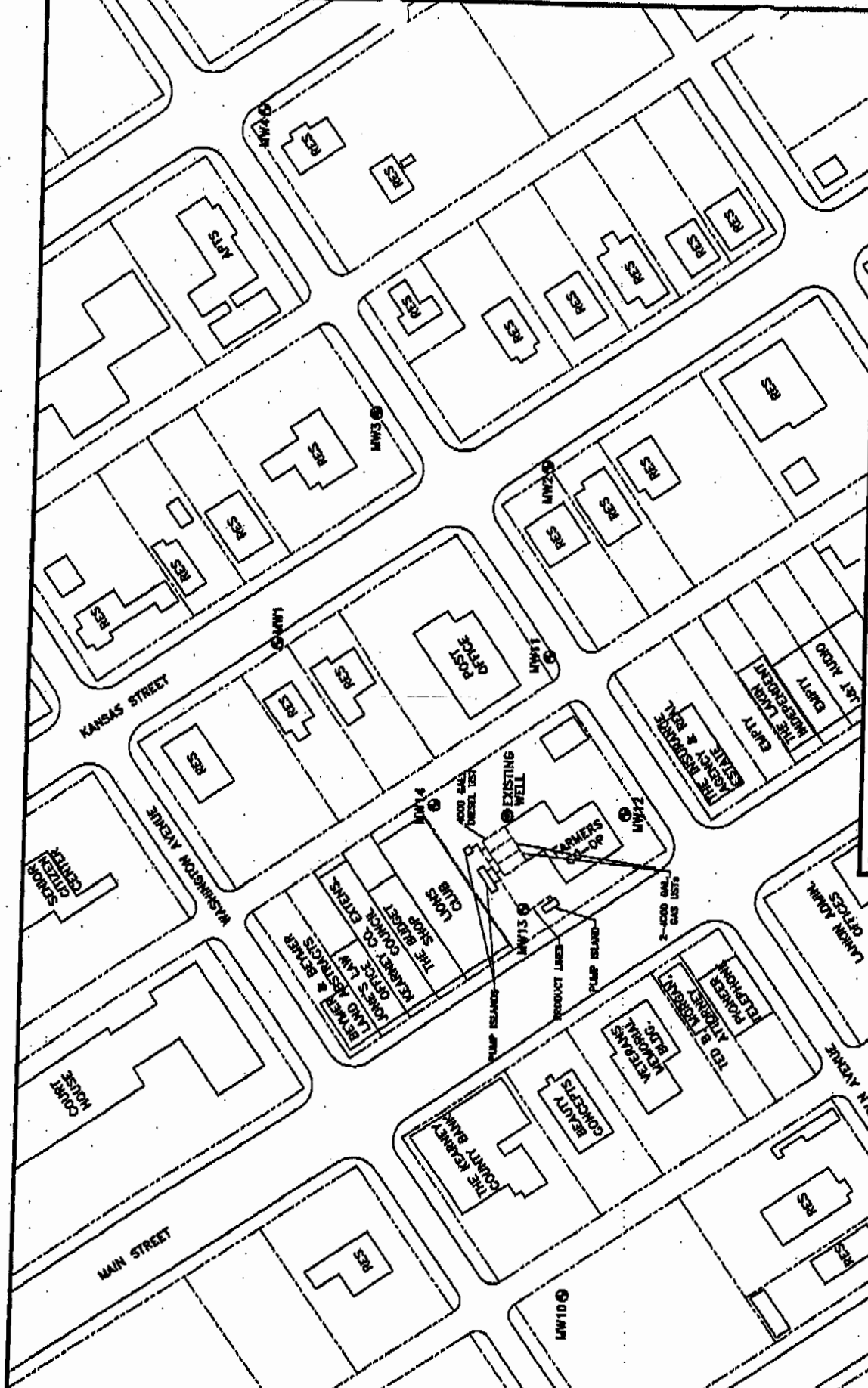
1 Septic tank	4 Lateral lines	7 Pit privy	<u>11</u> Fuel storage	14 Abandoned water well
2 Sewer lines	5 Cess pool	8 Sewage lagoon	12 Fertilizer storage	15 Oil well/Gas well
3 Watertight sewer lines	6 Seepage pit	9 Feedyard	13 Insecticide storage	16 Other (specify below)

Direction from well? southwest How many feet? 380

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	1	CLY, V DK BRN, ORGANIC RICH, SL TO MOD SLTY			
1	10	CLY, LT BRN, MOD SLTY TO V SLTY			
10	11	CLY, MED BRN, V SNDY F TO MED GRN			MW3
11	13	SND, F TO MED, GRY TO BRN			FLUSH MOUNT COVER
13	17	SND, V F TO C GRN, ORANGE TO YELL			00005890
17	20	SND, F TO C GRN, YELL-GRY-BRN, MOD GRVL			

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) 11-02-93 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 527 This Water Well Record was completed on (mo/day/yr) 11-10-93 under the business name of GeoCore Services, Inc. by (signature) Dad Kals

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, Topeka, Kansas 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.



**GEOCORE INC.**  
 P.O. BOX 386 (785) 826-1616 SALINA, KANSAS  
**GEOCORE PROJECT NO. 296**  
 DATE ORIGINATED: 04/94  
 SCALE: 1"=100'

**SITE AREA MAP**  
 SITE: FARMER'S COOP LAKIN  
 LOCATION: LAKIN, KANSAS  
 SPOT: SEC 27, T24S, R26W  
 MW, SE, NW, NE  
 DRAFTER: RLR

FILE: FC1296A01M.dwg

