County: <u>Sedqwick</u>	Fraction	SW	Sec. <u>29</u>	T 25 S	R_3	EW
CORRECT	ION(S) TO WATER	WELL COMPL	ETION RECOR	D (WWC-5)		
O	(to rectify lacking	ng or incorrect in	formation)			
Owner: Bogner.	Lairy					
Location was listed as:	/		Location change	ed to:		
Section-Township-Range:						
Fraction (1/4 1/4 1/4):						
Other changes: Initial statements: _	Harve	y Con	nty			
Changed to:	<u>sedgwic</u>	K Cou	inty			
Comments:						
Verification method: Write information in KQS website Submitted by: Kansas Geological Sur	en & legal WIMAS de	desci	e, and initia	water ma poing als: DEL date: ace, KS 66047-372	right. +00/0 2/2/20	5 h
to: Kansas Dept of Health & Environ	• -	•				

WATE	R WEI	LL RECORD	Form W	WC-5	Division of Wate	r Resources App. N	48,788		
		OF WATER WELL:	Fraction			Township No.	Range Number		
	ity: Har		1/4 1/4	1/4 SW 1/4	29	T 25 S	R 3 DE WW		
Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here					Global Positioning System (GPS) information: Latitude:				
W 85th St N and N 295th St W			Longitude: (in decimal degrees)						
	LL #2	and it 255th St W			Elevation: (in decimal degrees)				
***	LL #2				Datum: WGS 8				
2 WA	TER W	ELL OWNER: Bogner	Dairy		Collection Method:	+, 🗀 14AD 65, 🗀	NAD 27		
RR#	, Street		S. Haven			ce/Model:)		
		MD Code	KS 67543		Digital Map/Ph	oto, Topographi	c Map, Land Survey		
		Haven,	110 07343		Est. Accuracy: -	3 m, ☐ 3-5 m, ☐	5-15 m, >15 m		
3 LOC	ATE WE	ELL							
WIT	H AN "X	" IN 4 DEPTH OF	COMPLETED WEL	ட <u>.(.)</u>	ft.				
SECT	TION BO	X: Depth(s) Ground	lwater Encountered	(1). 4.4	ft. (2)	ft. ((3) ft.		
1	N	WELL'S STAT	IC WATER LEVEL	14 ft.	below land surface i	measured on mo/d	(3) ft. ay/yr		
		Pump	test data: Well wate	r was	ft. after	hours pum	ping gpm		
	, ,	LEST VIELD 30	00gpm. Well wate						
w I	V N		eter 30in. to						
l "			TO BE USED AS:				njection well		
							Other (Specify below)		
¥	K s	☑ Irrigation							
	l		bacteriological sample	e submitted to	Department?	Yes 🖊 No			
	S		day/yr sample was sub						
	1 mile		fected? Ves						
5 TYPE OF CASING USED: ☐ Steel ☑ PVC ☐ Other									
CASIN	G JOIN	IS: Glued	nped	☐ Threaded					
Casin	g diamet	er .16 in. to .70	ft., Diameter	in. 1	o ft., D	iameter	in. to ft.		
		above land surface12		. 1 b	lbs./ft., Wall thic	kness or gauge N	oSCH4U		
		EEN OR PERFORATION		_					
_ =	Steel	Stainless Steel	PVC PVC	🗆	Other (Specify)				
	Brass	Galvanized Steel	None used (open h	iole)					
		ERFORATION OPENING	S AKE: Gauze wrapped	7 T	C3 Dellad balan	□ Nous (sees hal	->		
		ous slot Mill slot		Saw out	Drilled holes	☐ None (open hol	()		
□ Louvered shutter □ Key punched □ Wire wrapped ☑ Saw cut □ Other (specify)									
SURGEN-PERFURATED INTERVALS: FIUIII									
From ft. to ft., From ft. to ft.									
	GRAVEL PACK INTERVALS: From 20 ft. to 70 ft., From ft. to ft. From ft. to ft., From ft. to ft.								
CDO	TIT BAA	TEDIAL . CINest some	TIOIII	II. 10		IL.	ю п.		
O GRU	UT MA	TERIAL: Neat ceme	20 Cement grout	Benton	ite 🔟 Other	E			
Grout In			_	1	τ. το π.,	From	π. τοπ.		
		est source of possible conta		☐ Livestock p			er (specify below)		
•	Septic ta Sewer lin			Fuel storage			ier (specify below)		
				Fertilizer st		1101	IE - OPEN FIELD		
☐ Watertight sewer lines ☐ Seepage pit ☐ Feedyard ☐ Fertilizer storage ☐ Oil well/gas well NONE - OPEN FIELD ☐ Distance from well ☐ Di									
FROM	ТО	LITHOLOG		FROM			GGING INTERVALS		
0	39	Clay	10 200	1 KOW	10 EITHOLE	oo (cont.) or 1 LC	OOMO MILKYALS		
39	45			 					
45	67	Fine Sand	au lavara						
		Medium Sand w/few cl	ay layers	 					
67	70	Shale		 					
				 _					
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) .19/28/29.14 and this record is true to the best of my knowledge and belief.									
		ell Contractor's License N							
		ss name of Premier Pur							
INSTRUC	CTIONS:	Use typewriter or ball point pen	. PLEASE PRESS FIRMLY	and <u>PRINT</u> cle	arly. Please fill in blanks	and check the correct	answers. Send one copy to		
	Kansas Department of Health and Environment, Burcau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5524. 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								
I Telephoi	ne 785-296	5-5524. Send one copy to WATE	R WELL OWNER and reta	ain one for your r	ecords. Include fee of \$	5.00 for each construct	ted well. Visit us at		