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

(to rectify lacking or incorrect information)

	County: Rear hV
Location listed as:	Location changed to:
Section-Township-Range: None Given	2-255-35W
Fraction (1/4 1/4 1/4):	SW SE SE NE
Other changes: Initial statements: No county giv	rea
Changed to: Kearny County	
Comments:	
verification method: <u>Latitude & longitude</u> , and mapping tool on KGS wel	KGS' "LEO" conversion tool,
	initials: date: 7/9/2009
submitted by: Kansas Geological Survey, Data Resources Library, 1930 Co	onstant Ave., Lawrence, KS 0604/-3/26

to: Kansas Dept of Health & Environment, Bureau of Water, 1000 SW Jackson, Suite 420, Topeka, KS 66612-1367.

LOCATION OF WAITER WELL: Fraction Section Number Township Number Range Number Section	WATE	R WELI	RECORD	Form WWC-	-5	Division of Wate	r Resources; App. No.		
Latitude: 177-9533 Longitude: 197-196 Longitude: 197-196 Elevation: 2981 Longitude: 1981 Longitude:	1		F WATER WELL:	1	1/4	Section Number	1		
2 WATER WELLOWER: RR#, St. Address, Box #: City, State, ZIP Code 3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: WELL'S STATIC WATER LEVEL	located within city?					Latitude: 37° 54,535			
Data Collection Method: Data Collection	AC MOOF								
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: NELL'S STATIC WATER ENCULE									
SECTION BOX: Depth(s) Groundwater Encountered (1)	3 LOC	CATE WE	LL'S 4 DEPTH OF COMI	PLETED WELL	Z.7.4	! ft.	Wiethod. WGS	*7	
SECTION BOX: N Pump test data: Well water was. N Est. Vield. 5.02 gpm: Well water was. Section of the sect			IN Denth(s) Groundwater	Encountered (1)		ft (2)	ft (3)	ft	
Est. Yield. 57. gpm: Well water was	I	TION BO	X: WELL'S STATIC WA	TER LEVEL	7	. below land surface	measured on mo/day	/yr z-//-09	
WELL WATER TO BE USED AS: S Public water supply 9 Dewatering 11 Injection well 2 Irrigation 4 Industrial 7 Domestic 3 feedlot 6 of 0il field water supply 9 Dewatering 12 Other (Specify below) Was a chemical/bacteriological sample submitted to Department? Yes	 T	N	Pump test data Est. Yield 5.0 gpm	: Well water was 1: Well water was	1.85.4.	ft. after	hours pumping hours pumping	gpm gpm	
2 Irrigation 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well Was a chemical/bacteriological sample submitted to Department? Yes		W NE	WELL WATER TO B	E USED AS: 5 Publ	ic water	supply 8 Air	conditioning 11 Inj	ection well	
Sample was submitted. Water well disinfected? Yes. No. No. Welded. Direction the well disinfected? Yes. No. No. Water well disinfected? Yes. No. No. Water well disinfected? Yes. No. No. Water well disinfected? Yes. No. No. Welded. Clamped. Threaded. Belief the welded. Melded. Melded. Threaded. Belief the welded. Melded. Melded. Threaded. Belief the welded. Melded. Threaded. Belief the welded. Melded. Meld	w			ustrial 7 Domesti	ic (lawn	& garden) 10 Mor	nitoring well		
Sample was submitted	SV	v se -	- Was a chemical/bacter	iological sample subr	nitted to	Department? Yes	No	If ves. mo/dav/vrs	
5 TYPE OF CASING USED: 5 Wrought Iron 1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded W			Sample was submitted		. Wat	er well disinfected?	Yes No		
Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded.	5 TVPI		INC USED: 5 Wrought	Iron 8 Conc	rete tile	CASIN	G IOINTS: Glued	Clamped	
Blank casing diameter	1	Steel	3 RMP (SR) 6 Asbestos-	-Cement 9 Other	r (specify	y below)	Welded	•	
Casing height above land surface in, Weight lbs./ft. Wall thickness or guage No. 248 TYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel 3 Stainless Steel 5 Fiberglass	Blank ca	PVC asing diam	4 ABS 7 Fiberglass 7 Fiberglass 7 Fiberglass	ft Diameter		in. to ft	Threaded Diameter	in. toft.	
1 Steel 3 Stainless Steel 5 Fiberglass	Casing 1	neight abov	e land surface	in., Weight		.lbs./ft. Wall thic	ckness or guage No	200#	
2 Brass 4 Galvanized Steal 6 Concrete tile 8 RM (SR) 10 Asbestos-Cement 12 None used (open hole) SCREEN OR PERFORATION OPENINGS ARE: 1 Continuous slot	1				9.	ABS	11 Other (Specify)		
1 Continuous slot				rete tile 8 RM (SR	10	Asbestos-Cement	12 None used (open	hole)	
From	1	Continuou	s slot	auzed wrapped 77	orch cut	9 Drilled holes	11 None (open h	ole)	
From	SCREE!	Louvered s N-PERFOI	hutter 4 Key punched 6 W RATED INTERVALS: From.	rire wrapped 8 S	Saw Cut	10 Other (specif	ý) ft. to	ft.	
From ft. to ft., From ft. to ft., From ft. to ft. 6 GROUT MATERIAL: 1 Neat cement 2 Cement grout Bentonite 4 Other Grout Intervals: From ft. to ft., From ft. to ft., From ft. to ft., From ft. to ft. What is the nearest source of possible contamination: 1 Septic tank	Jenes.		From.	ft. to .		ft., From	ft. to	ft.	
Grout Intervals: From		GRAVEL							
Grout Intervals: From	6 GRO	UT MATI	ERIAL: 1 Neat cement 2	Cement grout Be	ntonite	4 Other			
1 Septic tank 2 Lateral lines 7 Pit privy 2 Sewer lines 5 Cess pool 8 Sewage lagoon 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer Storage 15 Oil well/gas well below) 1 FROM TO LITHOLOGIC LOG FROM TO PLUGGING INTERVALS 7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was Constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year)	Grout In	ntervals:	From	7.0 ft., From		. ft. to f	t., From	ft. toft.	
2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 2 Abandoned water well below) 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer Storage 15 Oil well/gas well	1		-		10 Lives	tock pens 13 Ins	secticide Storage	16 Other (specify	
Direction from well? S. How many feet? S. FROM TO PLUGGING INTERVALS 19 35	2	Sewer line	5 Cess pool	8 Sewage lagoon	l 1 Fuel s	torage 🟉 Al	oandoned water well	below)	
FROM TO LITHOLOGIC LOG FROM TO PLUGGING INTERVALS 19									
75 274 Sand + qraved w/streats of clay 7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was 6 constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year)	FROM	TO	LITHOLOGIC					ERVALS	
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was 6 constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year)		1			 				
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was 60 constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year)									
under my jurisdiction and was completed on (mo/day/year)				clay	<u> </u>				
under my jurisdiction and was completed on (mo/day/year)									
under my jurisdiction and was completed on (mo/day/year)									
under my jurisdiction and was completed on (mo/day/year)									
under my jurisdiction and was completed on (mo/day/year)	7 CON	_ ΓRACTOI	R'S OR LANDOWNER'S CI	ERTIFICATION: T	his water	r well was (O const	ructed, (2) reconstruct	ed, or (3) plugged	
under the business name of Rockel Dell Dell Dell by (signature) by (signature) Western Boundary of the Structions: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks, underline or circle the correct answers. Send top	under my jurisdiction and was completed on (mo/day/year) 2.11-0.9. and this record is true to the best of my knowledge and belief.								
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, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone	INSTRUC	CTIONS: U	e typewriter or ball point pen. PLEA	<i>ISE PRESS FIRMLY</i> and <i>H</i>	PRINT clea	arly. Please fill in blank	s, underline or circle the co		
785-296-5522. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well. Visit us at	785-296-5	5522. Send	one to WATER WELL OWN	TER and retain one for	or your i	records. Fee of \$5.	00 for each constructed	well. Visit us at	
http://www.kdheke.gov/wgtemuell/index.html									