

County: Ford Fraction: SE SE SE SW Sec. 33 T. 26 S R. 24 W

**CORRECTION(S) to WATER WELL COMPLETION RECORD Form WWC-5 (to rectify lacking or incorrect information)**

Owner: Cargill Meat Solutions M20R

If location corrected, was listed as:

Section-Township-Range: 3-27-24W

Fraction (¼ calls): NE SE NW

Location changed to:

33-26-24W

SE SE SE SW

Other changes: Initial statements: Latitude 37 degrees 44' 11" Longitude 99 degrees 57' 06"

Changed to: Latitude 37.736388 Longitude -99.951666

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

Verification method: Used KGS LEOWEB to convert lat/long, KGS mapper speaking with Pam Chaffee and email from Cargill.

Initials: SH Date: 03-01-2022

Submitted by:  Kansas Geological Survey, Data Resources Library, 1930 Constant Ave., Lawrence, KS 66047-3724  
 Kansas Dept. of Health & Environment, Bureau of Water, 1000 SW Jackson, Suite 420, Topeka, KS 66612-1367

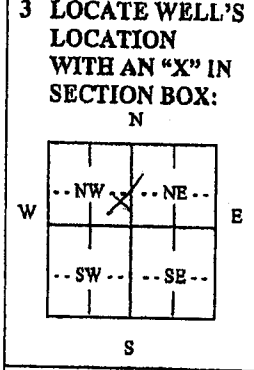
M 20R

**WATER WELL RECORD** Form WWC-5 Division of Water Resources; App. No.  

**1 LOCATION OF WATER WELL:** County: FORD Fraction NE 1/4 SE 1/4 NW 1/4 Section Number 3 Township Number T 27 S Range Number R 24 E/W

Distance and direction from nearest town or city street address of well if located within city? 1500' SW OF DODGE RD ADD HWY 400  
**Global Positioning Systems** (decimal degrees, min. of 4 digits)  
 Latitude: 37°44'11"  
 Longitude: 99°57'06"  
 Elevation: \_\_\_\_\_  
 Datum: \_\_\_\_\_  
 Data Collection Method: \_\_\_\_\_

**2 WATER WELL OWNER:** CARGILL MEAT SOLUTIONS  
 RR#, St. Address, Box # : E. HWY 400  
 City, State, ZIP Code : DODGE CITY, KS



**4 DEPTH OF COMPLETED WELL** ..... 75 ft.  
 WELL # M20R  
 Depth(s) Groundwater Encountered (1)..... ft. (2)..... ft. (3)..... ft.  
 WELL'S STATIC WATER LEVEL..... ft. below land surface measured on mo/day/yr.....  
 Pump test data: Well water was.....ft. after..... hours pumping..... gpm  
 Est. Yield.....gpm: Well water was.....ft. after..... hours pumping..... gpm  
**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 9 Dewatering 12 Other (Specify below)  
 2 Irrigation 4 Industrial 7 Domestic (lawn & garden) X10 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 CASING USED:** 5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued..... Clamped.....  
 1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded.....  
 X 2 PVC 4 ABS 7 Fiberglass Threaded. X.....  
 Blank casing diameter .....?..... in. to ..... 65..... ft., Diameter..... in. to ..... ft., Diameter..... in. to ..... ft.  
 Casing height above land surface..... 33..... in., Weight.....lbs./ft. Wall thickness or gauge No. SCH 40  
**TYPE OF SCREEN OR PERFORATION MATERIAL:**  
 1 Steel 3 Stainless Steel 5 Fiberglass X 7 PVC 9 ABS 11 Other (Specify) .....  
 2 Brass 4 Galvanized Steel 6 Concrete tile 8 RM (SR) 10 Asbestos-Cement 12 None used (open hole)  
**SCREEN OR PERFORATION OPENINGS ARE:**  
 1 Continuous slot 3 Mill slot 5 Gauzed wrapped 7 Torch cut 9 Drilled holes 11 None (open hole)  
 2 Louvered shutter 4 Key punched 6 Wire wrapped 8 Saw Cut 10 Other (specify) FACTORY CUT  
**SCREEN-PERFORATED INTERVALS:** From..... 75..... ft. to ..... 65..... ft., From..... ft. to ..... ft.  
 From..... ft. to ..... ft., From..... ft. to ..... ft.  
**GRAVEL PACK INTERVALS:** From..... 75..... ft. to ..... 63..... ft., From..... ft. to ..... ft.  
**BENTONITE CHIP SEAL** From..... 63..... ft. to ..... 60..... ft., From..... ft. to ..... ft.

**6 GROUT MATERIAL:** 1 Neat cement 2 Cement grout X3 Bentonite 4 Other .....  
 Grout Intervals: From ..... 60..... ft. to ..... 5..... ft., From..... ft. to ..... ft., From..... ft. to ..... ft.  
 What is the nearest source of possible contamination:  
 1 Septic tank 4 Lateral lines 7 Pit privy 10 Livestock pens 13 Insecticide Storage 16 Other (specify below)  
 2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 14 Abandoned water well  
 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer Storage 15 Oil well/gas well  
 Direction from well? ..... How many feet? .....

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS

**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) 8/25/10..... and this record is true to the best of my knowledge and belief.  
 Kansas Water Well Contractor's License No. .... This Water Well Record was completed on (mo/day/year) 10/10/10.....  
 under the business name of LAYNE CHRISTENSEN COMPANY by (signature) [Signature]

**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 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 <http://www.kdhe.state.ks.us/geo/waterwells>.