

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

Location listed as:

Section-Township-Range: 35-T275-R25W

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

County: Ford

Location changed to:

35-T265-R25W

SE SW NE

Other changes: Initial statements: Several monitoring wells in Dodge City were
mis-located 6 miles South

Changed to: T265

Comments: _____

verification method: WWCS database and mapquest website

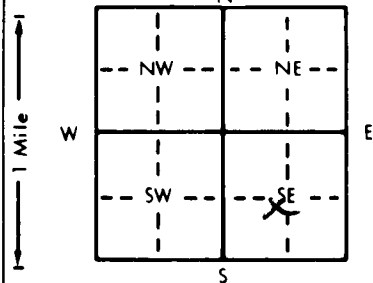
initials: DAH date: June 9, 2005

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.

1 LOCATION OF WATER WELL: County: **Ford** Fraction: **SE 1/4 SW 1/4 NE 1/4** Section Number: **35** Township Number: **T 27 S** Range Number: **R 25 E/W**

Distance and direction from nearest town or city street address of well if located within city? **m w 13 12**

2 WATER WELL OWNER: **Fas Stop**
 RR#, St. Address, Box #: **2nd & Cherry**
 City, State, ZIP Code: **Dodge City, 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: **40** ft. ELEVATION:
 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
 Bore Hole Diameter: **8** in. to **40** in. to in. to 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 9 Dewatering 12 Other (Specify below)
 2 Irrigation 4 Industrial 7 Lawn and garden only **10** Monitoring well
 Was a chemical/bacteriological sample submitted to Department? Yes. No. **X**; If yes, mo/day/yr sample was submitted
 Water Well Disinfected? Yes No **X**

5 TYPE OF BLANK CASING USED:
 1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued Clamped
2 PVC 4 ABS 7 Fiberglass Welded **X**
 Blank casing diameter in. to **10** ft., Dia in. to ft., Dia in. to ft.
 Casing height above land surface in., weight lbs./ft. Wall thickness or gauge No. **sch 40**
 TYPE OF SCREEN OR PERFORATION MATERIAL: **7** PVC 10 Asbestos-cement
 1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 11 Other (specify)
 2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 12 None used (open hole)
 SCREEN OR PERFORATION OPENINGS ARE: 5 Gauzed wrapped **8** Saw cut 11 None (open hole)
 1 Continuous slot 3 Mill slot 6 Wire wrapped 9 Drilled holes
 2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify)
 SCREEN-PERFORATED INTERVALS: From **10** ft. to **40** ft., From ft. to ft.
 GRAVEL PACK INTERVALS: From **9** ft. to **40** ft., From ft. to ft.

6 GROUT MATERIAL: 1 Neat cement 2 **2** Cement grout **3** Bentonite 4 Other
 Grout Intervals: From **0** ft. to **2** ft., From **2** ft. to **9** 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 14 Abandoned water well
 2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 15 Oil well/Gas well
 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer storage 16 Other (specify below)
 13 Insecticide storage
 Direction from well? How many feet?

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	5	very fine gray sand			
5	13	yellowish orange med sand to coarse			
13	17.5	Large rocks			
17.5	40	Fine sands to med and coarse sands			

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) **9/11/94** and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **534C** This Water Well Record was completed on (mo/day/yr) **7/11/97** under the business name of **AGD SERVICES** by (signature) **Bea Greer**

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.