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

Yanadan Nata I an	County: Ford									
Location listed as:	Location changed to:									
Section-Township-Range: 27-265-25W	26-265-25 W									
Fraction (1/4 1/4 1/4):	26-265-25 W E2 NE SW SW									
Other changes: Initial statements:										
Changed to:										
Comments: Located N. of Wyatt Earp E	Slyd, and E. of 11th Ave.									
verification method: Phase call to usell cont	tractor city street mon									
verification method: Phone call to well cont and Dodge City 1:24,000 t	opo, map.									
٠ / /	initials: 6 date: 3/4/2010									
submitted by: Kansas Geological Survey, Data Resources Library, 1930 Corto: Kansas Dept of Health & Environment, Bureau of Water, 1000 SW Jacks	nstant Ave., Lawrence, KS 66047-3726									

[]		W	ATER WELL REC	CORD	Form WWC-5	KSA 82a	-1212 ID N	lo. WARRING				
	TION OF WA	TER WELL:	Fraction	- ·		Se	ction Number	Township Nur	nber	R	ange Num	ber
County: 4		from poorcet to	NE 1/4	SW_	14 SW	1/4	27	1 7 26	S	R	25	E/ ((V)
	- 11	08 W.	wn or city street	aro	Dowland		5					
2 WATER	R WELL OW	NER: ING M	usket corr	poratio	n		Y					
RR#, St. A City, State,	ddress, Box , ZIP Code	# P.O.Box	50 2 10 8 Key	Δν 0.2	Ripio			Board of Agric Application N	umher			
3 LOCATE	WELL'S LC	CATION WITH	4 DEPTH OF C	COMPLET	ED WELL	79	ft. ELEVA	TION: 4497	//			
AN "X" II	N SECTION N	BOX:	Denth(s) Group	ndwater F	ncountered	₁ 3 <i>X</i>	44		" •			
	1	T	WELLSSIAII	CWAIEF	(LEVEL ?!/	tt. be: الجيم	low land surfac	ce measured on mo/d	av/vr 🕜	シノンク	1104	
	, , , , , , , , , , , , , , , , , , ,	-	1 0	nip test ut	ala. VV e li wale	n was	II.	after	hours or	ımnina		anm
	-NW	- NE	WELL WATER	TO BE O	SED AS: 5	Public water	supply	8 Air conditioning		jection w		gpm
	,		1 Domestic			Oil field wate		9 Dewatering	12 0	ther (Spe	ecify below	v)
W		E	2 Irrigation	4 In	dustrial 7	Domestic (la	wn & garden)	Monitoring well.				
	- 614/	, CE						$oldsymbol{ u}$				
	3,1	- SE	Was a chemica mitted	al/bacterio	logical sample	submitted to		Yes No;		o/day/yrs		vas sub-
			milled				VV	ater Well Disinfected	? Yes		(No	,
E TYPE	S	MOINO HOED					19744					
5 TYPE (ASING USED: 3 RMP (SI	R)	5 Wrou	ght iron stos-Cement	8 Concr	ete tile (specify below	CASING JOIN				
€ PVC	\supset	4 ABS	,	7 Fiber	alass				Threa	ided 4	r	
Blank casi	ng diameter	a	in. to	49	ft., Dia		in. to	ft., Dia		ir	ı. to	ft.
Casing hei	ight above la	nd surface	-3	in., v	veight	<u></u>	<u></u>	lbs./ft. Wall thickness	or guage	e No. S	h40F	VC
TYPE OF	SCREEN OF	PERFORATIO				(7 P)		10 Asbes				
1 Stee		3 Stainles: 4 Galvaniz		5 Fiber		8 RM 9 AB	MP (SR)	11 Other	,			•••••
2 Bras				6 Conc			55	12 None	` '	,		
		RATION OPENIN				ed wrapped wrapped		8 Saw cut 9 Drilled holes		11 Non	e (open h	ole)
1	itinuous slot vered shutte		lill slot ey punched		7 Torch	, ,		10 Other (specify)				ft.
		D INTERVALS		29	ft. to	79	ft From		ft to			ft
			From		ft. to		ft From		ft. to			ft.
(GRAVEL PAG	CK INTERVALS										
			F10111		11. 10		IL., FIOIII		11. 10			IL.
6 GROL	JT MATERIA	L: , 1 Nea	t cement	2 Ce	ment grout	3 Ben	tonite	4 Other				
Grout Inter		n /		? ft	., From	ft.	to	ft., From		ft. to		ft.
What is the	e nearest so	urce of possible	contamination:					tock pens			d water w	əll
1	otic tank		ral lines		7 Pit privy		11 Fuels	•		il well/Ga		
	ver lines	5 Cess			8 Sewage	•		zer storage	C16. 0	ther (spe	cify below)
l	-	r lines 6 Seep	page pit		9 Feedyar	d		ticide storage		• • • • • • • • • • • • • • • • • • • •	•••••	
Direction fr	1		LITHOLOGIC	2106		FROM	How mar	<u> </u>	GING IN	TED\/AL	2	
FROM	ТО	·T-		LOG		FROM	10	FLOG	GING IN	IENVAL		
0	 	100 SD	<u> </u>	/1								
5	33	Clay To	and "Fill	ine to	Dan 656							
22	36	Sand	tine to C	on ree	moist							
33 30	40		sandy wit									
40	49	Clay S	ity, mois	1 3.00								
	'											
					4.44							
		4										
				ΛΛ	W18							
				741	WID							
7 -												
CONTR	ACTOR'S C	R LANDOWNE	:R'S CERTIFICA コーハム					onstructed, or (3) plug				
Water Well	∪⊓ (mo/day/y Contractor's	ear) 64-	ริงป		This Water	Well Record	and this re	cord is true to the best d on (mo/day/yr),	5/27	owiedge	anu bellet.	ransas
i	usiness nam		- •	A /				(signature)	2/0101		1000	
INSTRUC	TIONS: Use type	writer or ball point pe	Mo Creat	IRMLY and F	PRINT clearly. Pleas	e fill in blanks, un	derline or circle the	correct answers. Send top t	ree copies	to Kansas I	Apartment of	Health
and Enviro	onment, Bureau o	of Water, Geology Se ach <u>constructed</u> well	ction, 1000 SW Jacks	on St., Suite	420, Topeka, Kansa	s 66612-1367. Te	elephone 785-296-5	5522. Send one to WATER	VELL OWNE	R and retai	n one for you	•