

CORRECTION TO WATER WELL RECORD (WWC-5)

The following correction(s) was made to the attached WWC-5 log, in order to file the item or to rectify lacking or incorrect information.

Fraction (1/4 1/4 1/4) Section-Township-Range changed:

listed as SE SE SW 26-21s-7W

changed to SE SE SW 21- 26s-7W

Other changes: Initial statements: _____

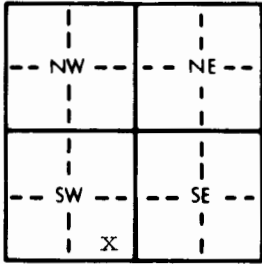
Changed to: _____

Comments: _____

verification method: written description, Pretty Prairie 1:24000

initials: AM date: 10/16/99

submitted by: Kansas Geological Survey, Data Resources Library, 1930 Constant Ave., Lawrence, KS 66047-3726
to: Kansas Dept of Health & Environment Bureau of Water Industrial Programs, Bldg 283, Forbes Field, KS 66620

1 LOCATION OF WATER WELL: County: <u>Reno</u>		Fraction <u>SE 1/4 SE 1/4 SW 1/4</u>		Section Number <u>26</u>	Township Number <u>T 21 S</u>	Range Number <u>R 7W E/W</u>
Distance and direction from nearest town or city street address of well if located within city? <u>1 mile South of Pretty Prairie and 4 West</u>						
2 WATER WELL OWNER: <u>Stella F. Graber</u> RR#, St. Address, Box #: <u>Box 334</u> City, State, ZIP Code: <u>Pretty Prairie, Ks. 67570</u> 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 Was <u>56</u> ft. ELEVATION: _____ Depth(s) Groundwater Encountered 1. _____ ft. 2. _____ ft. 3. _____ ft. WELL'S STATIC WATER LEVEL <u>25</u> ft. below land surface measured on mo/day/yr <u>7/30/92</u> 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 _____ in. to _____ ft., and _____ in. to _____ ft. WELL WATER TO BE USED AS: Was <u>5</u> Public water supply <u>8</u> Air conditioning <u>11</u> Injection well <u>1</u> Domestic <u>3</u> Feedlot <u>6</u> Oil field water supply <u>9</u> Dewatering <u>12</u> Other (Specify below) <u>2</u> Irrigation <u>4</u> Industrial <u>7</u> Lawn and garden only <u>10</u> Monitoring well Was a chemical/bacteriological sample submitted to Department? Yes _____ No <u>1</u> ; If yes, mo/day/yr sample was submitted _____ Water Well Disinfected? Yes <u>1</u> No _____				
5 TYPE OF BLANK CASING USED: Was _____ <u>1</u> Steel <u>3</u> RMP (SR) <u>6</u> Asbestos-Cement <u>9</u> Other (specify below) _____ <u>2</u> PVC <u>4</u> ABS <u>7</u> Fiberglass _____ Blank casing diameter <u>12</u> in. to _____ ft., Dia. _____ in. to _____ ft., Dia. _____ in. to _____ ft. Casing height above land surface <u>18</u> in., weight _____ lbs./ft. Wall thickness or gauge No. _____ TYPE OF SCREEN OR PERFORATION MATERIAL: was _____ <u>1</u> Steel <u>3</u> Stainless steel <u>5</u> Fiberglass <u>8</u> RMP (SR) <u>11</u> Other (specify) <u>NA</u> <u>2</u> Brass <u>4</u> Galvanized steel <u>6</u> Concrete tile <u>9</u> ABS <u>12</u> None used (open hole) SCREEN OR PERFORATION OPENINGS ARE: _____ <u>1</u> Continuous slot <u>3</u> Mill slot <u>6</u> Wire wrapped <u>9</u> Drilled holes <u>11</u> None (open hole) <u>2</u> Louvered shutter <u>4</u> Key punched <u>7</u> Torch cut <u>10</u> Other (specify) <u>NA</u> SCREEN-PERFORATED INTERVALS: From <u>NA</u> ft. to <u>NA</u> ft., From _____ ft. to _____ ft. From _____ ft. to _____ ft., From _____ ft. to _____ ft. GRAVEL PACK INTERVALS: From _____ ft. to _____ ft., From _____ ft. to _____ ft. From _____ ft. to _____ ft., From _____ ft. to _____ ft.						
6 GROUT MATERIAL: <u>1</u> Neat cement <u>2</u> Cement grout <u>3</u> Bentonite <u>4</u> Other <u>Hole Plug</u> Grout Intervals: From <u>25</u> ft. to <u>11</u> ft., From <u>11</u> ft. to <u>5</u> ft., From _____ ft. to _____ ft. What is the nearest source of possible contamination: <u>1</u> Septic tank <u>4</u> Lateral lines <u>7</u> Pit privy <u>10</u> Livestock pens <u>14</u> Abandoned water well <u>2</u> Sewer lines <u>5</u> Cess pool <u>8</u> Sewage lagoon <u>11</u> Fuel storage <u>15</u> Oil well/Gas well <u>3</u> Watertight sewer lines <u>6</u> Seepage pit <u>9</u> Feedyard <u>12</u> Fertilizer storage <u>16</u> Other (specify below) _____ <u>13</u> Insecticide storage _____ Direction from well? _____ How many feet? _____						
FROM		TO		LITHOLOGIC LOG		FROM TO PLUGGING INTERVALS
						<u>56'</u> <u>25'</u> <u>Chlorinated sand</u>
						<u>25'</u> <u>11'</u> <u>Hole Plug</u>
						<u>11'</u> <u>5'</u> <u>Chlorinated sand w/ Hole Plug</u>
						<u>5'</u> <u>0</u> <u>Top Soil</u>
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) <u>7/30/92</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>134</u> This Water Well Record was completed on (mo/day/yr) <u>8/3/92</u> under the business name of <u>Rosencrantz-Bemis</u> by (signature) <u>Doug Dodson</u>						