

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 SW SW 22-27S-8W

changed to SE SW SW 27-28S-8W

Other changes: Initial statements: _____

Changed to: _____

Comments: _____

verification method: Kingman NW quad

initials: dh date: 10/6/99

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:		Fraction	Section Number		Township Number		Range Number	
County: Reno.		SE 1/4 SW 1/4 SW 1/4	22		T 27 S		R 8W 12E	
Distance and direction from nearest town or city street address of well if located within city?								
4 Miles W., 7 Miles N., 1/4 Miles East Of Kingman, Kansas 67068								
2 WATER WELL OWNER: Maxine Belt								
RR#, St. Address, Box #: 165 Wallace St.								
City, State, ZIP Code: Kingman, Kans. 67068								
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: 52' ft. ELEVATION:					
			Depth(s) Groundwater Encountered 1. 18' ft. 2. ft. 3. ft.					
			WELL'S STATIC WATER LEVEL 18' ft. below land surface measured on mo/day/yr Dec 7-90					
			Pump test data: Well water was NA ft. after hours pumping gpm					
			Est. Yield NA gpm: Well water was ft. after hours pumping gpm					
			Bore Hole Diameter 8 1/4" in. to 52' ft. and in. to ft.					
			WELL WATER TO BE USED AS:					
			XX Domestic 3 Feedlot 5 Public water supply 8 Air conditioning 11 Injection well					
			2 Irrigation 4 Industrial 6 Oil field water supply 9 Dewatering 12 Other (Specify below)					
			7 Lawn and garden only 10 Monitoring well					
			Was a chemical/bacteriological sample submitted to Department? Yes No XX; If yes, mo/day/yr sample was submitted					
			Water Well Disinfected? Yes X No					
5 TYPE OF BLANK CASING USED:								
1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued X Clamped								
XX PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded								
7 Fiberglass Threaded								
Blank casing diameter 5" in. to 52' 42' ft. Dia in. to ft. Dia in. to ft.								
Casing height above land surface 17" in. weight 160 lbs./ft. Wall thickness or gauge No. sdr 26								
TYPE OF SCREEN OR PERFORATION MATERIAL:								
1 Steel 3 Stainless steel 5 Fiberglass XX PVC 10 Asbestos-cement								
2 Brass 4 Galvanized steel 6 Concrete tile 8 RMP (SR) 11 Other (specify)								
12 None used (open hole)								
SCREEN OR PERFORATION OPENINGS ARE:								
1 Continuous slot 3 Mill slot 5 Gauzed wrapped XX 8 Saw cut 11 None (open hole)								
2 Louvered shutter 4 Key punched 6 Wire wrapped 9 Drilled holes								
7 Torch cut 10 Other (specify)								
SCREEN-PERFORATED INTERVALS: From 42' ft. to 52' ft. From ft. to ft. From ft. to ft.								
GRAVEL PACK INTERVALS: From ft. to ft. From ft. to ft. From ft. to ft.								
6 GROUT MATERIAL: 1 Neat cement XX 2 Cement grout XX 3 Bentonite 4 Other								
Grout Intervals: From 22' ft. to 6' ft. From Cement 6' ft. to 0' ft. From ft. to ft.								
What is the nearest source of possible contamination:								
XX 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? SW How many feet? App 800'								
FROM TO LITHOLOGIC LOG FROM TO PLUGGING INTERVALS								
0' 7' Top soil.								
7' 16' Clay & gravel Mix.								
16' 18' Clay.								
18' 29' Fine sand.								
29' 37' clay.								
37' 44' Medium Course sand.								
44' 52' Course clean sand.								
Red Bed.								
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) Dec 7 90 and this record is true to the best of my knowledge and belief. Kansas								
Water Well Contractor's License No. 112 This Water Well Record was completed on (mo/day/yr) Dec 28 - 90								
under the business name of Wells Drilling Co. 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, Topeka, Kansas 66620-7320. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.								