| County:FOFA Fraction: _SWSW NW   | / SW Sec. 8 1 2/S R 24 W                                 |  |  |  |  |  |  |
|--|--|--|--|--|--|--|--|
| CORRECTION(S) TO WATER WELL COMPLETION RECORD                          | Form WWC-5 (to rectify lacking or incorrect information) |  |  |  |  |  |  |
| Owner: <u>Gabriel Garcia</u>   |  |  |  |  |  |  |  |
| If location corrected, was listed as:                                  | Location changed to:                                     |  |  |  |  |  |  |
| Section-Township-Range: 10-335-33 W  Fraction (1/4 calls): SE NE NW SW | 8-275-24W  |  |  |  |  |  |  |
| Fraction (1/4 calls): SE NE NW SW                                      | SW SW NW SW  |  |  |  |  |  |  |
| Other changes: Initial statements: Address: 1378 113 Rd.               |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
| Changed to:  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
| Comments:  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
| Verification method: Well owner's addices                              | Ford County saline parcel                                |  |  |  |  |  |  |
| Verification method: well owner's addiess                              | erial photos on KGS website.                             |  |  |  |  |  |  |
|  | Initials: Date: 1/8/2019                                 |  |  |  |  |  |  |
| Submitted by: Kansas Geological Survey, Data Resources Library, 1      |  |  |  |  |  |  |  |
| <u> </u>   | (01/25/2018)   |  |  |  |  |  |  |

| WATER WELL I  |                    | Form V                                      | WWC-5                                     |  | sion of Water                           |   |                  |   |  |
|---|--------------------|---|---|--|---|---|------------------|---|--|
| Original Record   |                    |   | e in Well Use                             |  | urces App. No                           |   | Well ID          |   |  |
| 1 LOCATION OF V   | VATER WEL          | L:  | Fraction                                  | Section Number   Township Number   Range Number  |   |   |                  |   |  |
| County: FORD  |                    |   | SE 1/4 NE 1/4 NW 1/4                      |  | SW ¼ 10 T 33 S R 33 □ E ■ W             |   |                  |   |  |
| 2 WELL OWNER:   | Last Name: GAF     | RCIA  | First: GABRIEL                            |  |   | here well is located                      |                  |   |  |
| Business:   |                    |   |   | direction from r                                 | earest town or in                       | ntersection): If at owne                  | r's address, che | eck here:                               |  |
| Address: 1378 113<br>Address:   | RD                 |   |   |  |   |   |                  | i                                       |  |
| City: DODGE   | CITY               | State: KS                                   | ZIP: 67801                                |  |   |   |                  |   |  |
| 3 LOCATE WELL   |                    |   |   | 000 -  |   |   |                  |   |  |
| WITH "X" IN   | I                  |   | IPLETED WELL:                             |  |   | le:                                       |                  |   |  |
| SECTION BOX:  |                    | Depth(s) Groundwater Encountered: 1)        |   |  |   |   |                  | cimal degrees)                          |  |
| N   | WELL'S ST          | 2)  |   |  |   |   |                  |   |  |
|   |                    |   | , measured on (mo-day                     |  |   | GPS (unit make/model:                     |                  |   |  |
| NW NE   |                    | above land surface, measured on (mo-day-yr) |   |  |   | (WAAS enabled? ☐ Yes ☐ No)                |                  |   |  |
|   |                    |   | vater was                                 |  | ☐ Lan                                   | ☐ Land Survey ☐ Topographic Map           |                  |   |  |
| W   | after              |   | s pumping                                 |  | Oni                                     | line Mapper:                              |                  |   |  |
| SW SE   |                    |   | vater was                                 |  |   |   |                  |   |  |
|   | Estimated Y        | nours                                       | s pumping                                 | gpm  | 6 Elevati                               | on:ft                                     | . Ground L       | evel 🗆 TOC                              |  |
| S   | Bore Hole D        | Diameter:                                   | 9.7/8 in. to                              | ft. and  |   | ☐ Land Survey ☐                           |                  |   |  |
| mile  | Boile Hole B       |   | in. to                                    |  |   | ☐ Other                                   |                  |   |  |
| 7 WELL WATER TO   | O BE USED A        |   |   |  |   |   |                  |   |  |
| 1. Domestic:  | 5. 🗆               | Public Wa                                   | ater Supply: well ID                      |  |   | Field Water Supply: 1                     |                  |   |  |
| Household   | 6. 🗆               | Dewaterin                                   | g: how many wells?                        |  | <ol><li>Test Ho</li></ol>               | ole: well ID                              |                  |   |  |
| Lawn & Garden   |                    |   | echarge: well ID                          |  |   | ed 🗌 Uncased 🗎                            |                  |   |  |
| Livestock   | _                  |   | g: well ID                                |  |   | rmal: how many bore                       |                  |   |  |
| 2. ☐ Irrigation 3. ☐ Feedlot  |                    | Air Sparge                                  | al Remediation: well II<br>e ☐ Soil Vapor |  |   | sed Loop 🔲 Horizon<br>en Loop 🔲 Surface D |                  |   |  |
| 4. ☐ Industrial   |                    | Recovery                                    |   | Extraction                                       |   | er (specify):                             |                  |   |  |
| Was a chemical/bacte  |                    |   |   | V = N-   |   |   |                  |   |  |
| Water well disinfected  |                    |   | illed to KDHE!                            | res No   | II yes, date s                          | sample was submitte                       | za:              | • |  |
| 8 TYPE OF CASING  |                    |   | C D Other                                 | CACD   | IC IODITE.                              | Cloud Clampa                              | d [] Wolded [    | Throadad                                |  |
| Casing diameter 5   | in to              | 200 a                                       | Diameter                                  | in to  | f Diame                                 | ter in to                                 | a ∐ weidea [     | i iireaded                              |  |
| Casing diameter 5 Casing height above land  | surface            | 12 in                                       | Weight                                    | lbs/ft   | Wall thickn                             | ess or gauge No. SD                       | R 21             |   |  |
| TYPE OF SCREEN O  | R PERFORAT         | ION MA                                      | TERIAL:                                   |  | *************************************** | or Bunger to title                        |                  |   |  |
|   | inless Steel       | ☐ Fiber                                     |   |  | ☐ Othe                                  | r (Specify)                               |                  |   |  |
|   | Ivanized Steel     |   |   | ised (open hole                                  | :)                                      |   |                  |   |  |
| SCREEN OR PERFOI  |                    |   |   |  |   |   |                  |   |  |
| ☐ Continuous Slot   | Mill Slot          | _ □ G:                                      | auze Wrapped 🔲 To                         |  |   | Other (Specify)                           |                  |   |  |
| Louvered Shutter  | ∐ Key Punch        | ned □ W                                     | /ire Wrapped ☐ Sa                         | iw Cut $\square$ N                               |   |   | 0                | 0                                       |  |
| SCREEN-PERFORATED INTERVALS: From160  |                    |   |   |  |   |   |                  |   |  |
| GRAVEL PACK INTERVALS: From   |                    |   |   |  |   |   |                  |   |  |
| Grout Intervals: From   | AL:   Neat c       | 25 Ement _                                  | f From                                    | entonite UC                                      | tner                                    | ft to                                     | н                | •••••                                   |  |
| Grout Intervals: From   |                    |   |   |  |   |   |                  |   |  |
| ■ Septic Tank   |                    |   |   |  |   |   |                  |   |  |
| Sewer Lines Cess Pool Sewage Lagoon Fuel Storage Abandoned Water Well   |                    |   |   |  |   |   |                  |   |  |
| ☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well  |                    |   |   |  |   |   |                  |   |  |
| ☐ Other (Specify)   |                    |   |   |  |   |   |                  |   |  |
| 10 FROM TO  |                    | ITHOLO                                      |   |  |   | ft<br>LITHO. LOG (cont.) o                |                  | NITEDWALE                               |  |
| 0 5   | SANDY TOP          |   | aic Log                                   | FROM   | 10 1                                    | ATTIO. LOG (cont.) o                      | I PLUGGING I     | INTERVALS                               |  |
| 5 55  | SANDY TUP          |   | DIAVEDS                                   |  |   |   |                  |   |  |
| 55 77   | SAND & GR          |   | D LATENS                                  | <del> </del>                                     |   |   |                  |   |  |
| 77 83   | CLAY               | VVLL  | M   | <del>                                     </del> |   |   |                  |   |  |
| 83 118  | MED SAND           |   |   |  |   |   |                  |   |  |
| 118 123   | SANDY CLA          | V   |   |  |   |   |                  |   |  |
| 123 198   |                    |   | W CLAY STRKS                              | Notes:   |   |   |                  |   |  |
| 198 203   | YELLOW CL          |   | THOUSE OF THE                             | 1,000  |   |   |                  |   |  |
| 203 207   |                    |   |   |  |   |   |                  |   |  |
| 11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, or plugged  |                    |   |   |  |   |   |                  |   |  |
| under my jurisdiction and was completed on (mo-day-year) .8/7/18  |                    |   |   |  |   |   |                  |   |  |
| Kansas Water Well Contractor's License No. 805 This Water Well Record was completed on (mo-day-gear) 8025/18  |                    |   |   |  |   |   |                  |   |  |
| under the business nan  | ne of SOUTH        | IVVEST.V                                    | NNUMILL & WATE                            | K.WELLSi   | gnature                                 | Marine.                                   | ZAUV             | **                                      |  |
| Mail 1 white copy along with a fee of \$5.00 for each constructed well to: Kansas Department of Health and Environment, Bureau of Water, GWTS Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Mail one to Water Well Owner and retain one for your records. Telephone 785-296-5524. |                    |   |   |  |   |   |                  |   |  |
| Visit us at http://www.kdhel  | •                  |   | 00012-1307. Wall one to                   | KSA 82a-12                                       |   | troi your records. Telepi                 | Revised 7/       |   |  |
| . John an at map in www.kdilci  | So to water Well/I |   |   | 11011 02u-12                                     |   |   | // IDCU //       |   |  |