

**CORRECTION(S) TO WATER WELL RECORD (WWC-5)**

(to rectify lacking or incorrect information)

County: Stanton

Location listed as:

Location changed to:

Section-Township-Range: 3-27-39

3-27S-39W

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

SW SW SE NE

Other changes: Initial statements: \_\_\_\_\_

Changed to: \_\_\_\_\_

Comments: \_\_\_\_\_

verification method: Written & legal descriptions, position on plat map,  
and mapping tool & aerial photo on KGS website.

initials: DR date: 10/22/2008

submitted by: Kansas Geological Survey, Data Resources Library, 1930 Constant Ave., Lawrence, KS 66047-3726

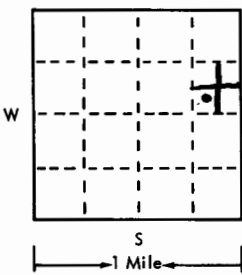
to: Kansas Dept of Health & Environment, Bureau of Water, 1000 SW Jackson, Suite 420, Topeka, KS 66612-1367.

USE TYPEWRITER OR BALL  
POINT PEN-PRESS FIRMLY,  
PRINT CLEARLY.

WATER WELL RECORD  
KSA 82a-1201-1215

T R EW sec 1/4 1/4 1/4 No.

Kansas State Dept. Of Health  
(Water Well Contractors)  
Forbes-Bldg. 740  
Topeka, Kansas 66620

1 Location of well:	County <b>Stanton</b>	Township name <b>Big Bow</b>	Fraction <b>SE SW NE</b>	Section number <b>3</b>	Town number <b>27</b>	Range number <b>39</b>
Distance and direction from nearest town or city: <b>10 1/2 m. North &amp; 1/4 West of Big Bow, Kansas</b>			3 Owner of well: <b>Earl Trussel</b> Address: <b>Big Bow, Kansas</b>			
Locate with "X" in section below: N  W E S 1 Mile			Sketch map: <b>1500' West &amp; 148' South</b>		4 Well depth: <b>290</b> ft. Date of completion <b>6-18-75</b> Well diameter <b>9 7/8</b> in.	
2 Type and color of material			From To		5 <input type="checkbox"/> Cable tool <input checked="" type="checkbox"/> Rotary <input type="checkbox"/> Driven <input type="checkbox"/> Dug <input type="checkbox"/> Hollow rod <input type="checkbox"/> Jetted <input type="checkbox"/> Bored <input type="checkbox"/> Reverse rotary	
					6 Use: <input checked="" type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry <input type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input type="checkbox"/> Commercial <input type="checkbox"/> Test well <input type="checkbox"/>	
Surface and fine sand			0 15		7 Casing: Material <b>Styro</b> Height: above/below <b>12"</b> Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <input type="checkbox"/> in. Diam. <b>Glued</b> Weight <b>320 lb./ft.</b> <b>5</b> in. <b>290</b> ft. depth! Drive shoe? <input type="checkbox"/> Yes <input type="checkbox"/> No in. to ft. depth	
					8 Screen: Manufacturer <b>Jess &amp; Lowell</b> Type <b>styro</b> Dia. <b>5"</b> Slot/gauze Length Set between ft. and ft. Fittings: <b>0-260 pl: 260-290 perf.</b> Gravel pack <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Size range of material <b>1/16-1/4</b>	
Brown clay & fine sand			15 45		9 Static water level: <b>170</b> ft. below land surface Date <b>6-18-75</b>	
Sand			45 90		10 Pumping level below land surfaces: <b>N A</b> ft. after hrs. pumping g.p.m. ft. after hrs. pumping g.p.m. Estimated maximum yield g.p.m.	
Brown sandy clay			90 150		11 Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date	
Lava rock & gray clay			150 165		12 Well head completion: <input checked="" type="checkbox"/> Pitless adapter <b>12</b> Inches above grade	
Gray clay			165 180		13 Well grouted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Depth: From <b>6</b> ft. to <b>20</b> ft.	
Yellow chalk & fine sand			180 195		14 Nearest source of possible contamination: ft. <b>150</b> Direction <b>N E</b> Type <b>sewer</b> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Gray clay & sandstone			195 290		15 Pump <b>Goulds</b> <input type="checkbox"/> Not installed Manufacturer's name Model number <b>na</b> HP <b>1</b> Volts <b>230</b> Length of drop pipe <b>252</b> ft. capacity <b>10</b> g.m.p. Type: <input checked="" type="checkbox"/> Submersible <input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating <input type="checkbox"/> Centrifugal <input type="checkbox"/> Other	
(use a second sheet if needed)						
16 Remarks: elevation  <b>Level</b>  Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley			17 Water well contractor's certification: This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief. <b>Wagner Drlg.</b> <b>253</b> Business name License No. Address <b>Ulysses, Kansas</b> Signed <i>[Signature]</i> Date <b>6-27-75</b> Authorized representative			

Forward the white, blue and pink copies to the Kansas State Dept. Of Health.

Form WWC-5