CORRECTION(S) TO WATER WELL RECORD (WWC-5)								
(to rectify lacking or incorrect	t information)							
, , ,	County: Haske//							
Location listed as:	Location changed to:							
Section-Township-Range: <u>55-28 5-3/</u>	35-285-3/W							
Fraction ( 1/4 1/4 1/4): SE SE SW	SESESW							
Other changes: Initial statements:								
Changed to:								

verification method: Written & legal descriptions, and mapping
tool on KGS website.

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.

			TER WELL RECO	ORD Form WWC-	5 KSA 82a	-1212 ID	No		
1 LOCATION C			Fraction	Co. Cra		ction Number	20		Range Number
County: Has			SE 1/4	Se 1/4 SW	1/4	- 55	<sub>T</sub> 28	S R	31 E/W
Distance and direction from nearest town or city street address of well if located within city?									
1½ North 2½ West of Copeland 2 WATER WELL OWNER: Linda White									
			Highway '	144			Board of Agricu	lture, Division	of Water Resources
City, State, ZIP (		: Copel	and, Kan	sas 67837	***		Application Nur		
3 LOCATE WELL'S LOCATION WITH 4 DEPTH OF COMPLETED WELL									
AN "X" IN SECTION BOX:    Depth(s) Groundwater Encountered 1 405 ft. 2 422 ft. 3 435 ft. WELL'S STATIC WATER LEVEL 33.0 ft. below land surface measured on mo/day/yr 8-3-06									
!		1 "	Pum	p test data: Well wa	ter was	ft	. after h	nours pumping	gpm
1 '	Est. Yield1.0 gpm: Well water was								
1		1	1 Domestic		6 Oil field water				
w - 1		1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below) 2 Irrigation 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well							
i									
sw		- SE		/bacteriological sampl	e submitted to		? Yes; If		
X		' 1	mitted	,		,	Water Well Disinfected?	Yes x	No
S									
1 Steel	LANK CA	ISING USED: 3 RMP (SF		<ul><li>5 Wrought iron</li><li>6 Asbestos-Cement</li></ul>	8 Conc 9 Other	rete tile (specify belo			Clamped
2 PVC		4 ABS	,	7 Fiberglass				Threaded	
							ft., Dia		
				in., weight			lbs./ft. Wall thickness		SDR21
TYPE OF SCRE	EN OR			E Eibergloog	7 P			os-Cement	
1 Steel 2 Brass		3 Stainless 4 Galvaniz		<ul><li>5 Fiberglass</li><li>6 Concrete tile</li></ul>	9 A	MP (SR) BS	11 Other (Specify)		
SCREEN OR PI	FREORA				azed wrapped		8 Saw cut		one (open hole)
1 Continuo			fill slot		re wrapped		9 Drilled holes		, , ,
2 Louvered			ey punched		rch cut		10 Other (specify)		
SCREEN-PERF	ORATE	OINTERVALS:	From3.7.	.039.0 ft. to	390-41	.0 ft., Fro	m 430-45	0. ft. to	ft.
, CDAN	/EL BAC	Z INTEDVALO	From	ft. to		ft., Fro	m	ft. to	ft.
GHAV	EL PAC	K INTERVALS	From2.0	ft. to		ft., Fro	m	ft. to	ft.
6 GROUT MA			t cement	2 Cement grout	_	ntonite	4 Other ft., From		
What is the nea				.UG. II., From	п.		estock pens		ned water well
1 Septic ta		•	ral lines	7 Pit priv	N		el storage	15 Oil well/	
2 Sewer lir		5 Cess		•	ge lagoon		tilizer storage		specify below)
		lines 6 Seep	•	9 Feedy			ecticide storage	•	
Direction from well?  How many feet?									
FROM	то		LITHOLOGIC	LOG	FROM	то	PLUGO	SING INTERVA	ALS
0	30	Topsoi.	l & clay		285	354	Clay (blue)		
.30	45	Clay			354	360	Sand (blue)		lay
	6U		fine san	ıd	360	375	Clay (blue)		(blue)
60	75	-	ith sand		375	380	Sand (blue)	& clay	
75.	90	Clay &		1	380	390	Clay (blue)	<del></del>	le lime
	05		little c		390 395	395 405	Sand (blue) Clay & litt	<u>&amp; clay</u>	
	20 35		ith cemer	cemented said		408	Sand	TE TIME	(nard)
	10	Sand		emented sa.	408	420	Clay & lime	(hard)	
	0.5C		cemented	sand & cla		422	Clay & lime		
1 1	55	Sand &			422	423	Sand		
	70			ittle lime	423	435	Clsw & ceme	nted sa	nd (very ha
	72	Sand			435	441	Sand		
272 2	85	Clay &	little l	ime (hard)	441	450	Clay & litt	<u>le lime</u>	
CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was									
							record is true to the best		
Water Well Contractor's Licence No									
under the business name of Dunham Drilling Inc. by (signature)   NSTRUCTIONS: 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									
I INSTRUCTIONS	. USE IVDEV	THIOD HED TO THE	au, rleade PHESS Fl	DIVILI AND PHINT CLEARLY. PR	sase IIII IN DIANKS. II	nuerime or circle	the currect answers. Send for the	THE CODIES TO KARS	as Decarrelett of Health

INSTRUCTIONS: Use typewriter or ball point pen. <u>PLEASE PRESS FIRMLY</u> and <u>PRINT</u> 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, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each <u>constructed</u> well.