

County: Gray Fraction: SE SE NE SE Sec. 7 T 29 S R 27 W

CORRECTION(S) TO WATER WELL COMPLETION RECORD (WWC-5) - to rectify lacking or incorrect information

Owner: Scott Glassco

Location changed to:

If corrected, location was listed as:

Section-Township-Range: _____

Fraction (1/4 1/4 1/4): _____

Other changes: Initial statements: No "nearest source of possible contamination" given.

Changed to: Abandoned Water Well, Southwest 800 ft.

Comments: _____

Verification method: Correspondence from drilling contractor.

Initials: DRA Date: 10/6/2017

Submitted by: Kansas Geological Survey, Data Resources Library, 1930 Constant Avenue, Lawrence, KS 66047-3724
 Kansas Dept. of Health & Environment, Bureau of Water, 1000 SW Jackson, Suite 420, Topeka, KS 66612-1367

WATER WELL RECORD Form WWC-5

Division of Water Resources App. No.

Well ID

Original Record Correction Change in Well Use

1 LOCATION OF WATER WELL: County: <u>Gray</u>	Fraction SE ¼ SE ¼ NE ¼ SE ¼	Section Number <u>7</u>	Township Number <u>T 29 S</u>	Range Number <u>R 27</u> <input type="checkbox"/> E <input checked="" type="checkbox"/> W
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2 WELL OWNER: Last Name: <u>Glassco</u> First: <u>Scott</u> Business: _____ Address: <u>PO Box 82</u> Address: _____ City: <u>Montezuma</u> State: <u>KS</u> ZIP: <u>67867</u>	Street or Rural Address where well is located (if unknown, distance and direction from nearest town or intersection): If at owner's address, check here: <input type="checkbox"/> Intersection <u>County Rd 20 & FF</u> <u>3/4 Mile south</u>
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3 LOCATE WELL WITH "X" IN SECTION BOX:

N

NW	NE
SW	SE X

S

-----1 mile-----

4 DEPTH OF COMPLETED WELL: 305 ft.

Depth(s) Groundwater Encountered: 1) 180 ft.
 2) _____ ft. 3) _____ ft., or 4) Dry Well

WELL'S STATIC WATER LEVEL: 142 ft.
 below land surface, measured on (mo-day-yr) 10/27/2015
 above land surface, measured on (mo-day-yr) _____

Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm
 Well water was _____ ft. after _____ hours pumping _____ gpm
 Estimated Yield: 20 gpm
 Bore Hole Diameter: 10 in. to 305 ft. and _____ in. to _____ ft.

5 Latitude: 37.537301 (decimal degrees)
Longitude: 100.307802 (decimal degrees)
 Datum: WGS 84 NAD 83 NAD 27
 Source for Latitude/Longitude:
 GPS (unit make/model: _____) (WAAS enabled? Yes No)
 Land Survey Topographic Map
 Online Mapper: _____

6 Elevation: 2656 ft. Ground Level TOC
 Source: Land Survey GPS Topographic Map
 Other KOLAR

7 WELL WATER TO BE USED AS:

1. Domestic: <input type="checkbox"/> Household <input type="checkbox"/> Lawn & Garden <input checked="" type="checkbox"/> Livestock 2. <input type="checkbox"/> Irrigation 3. <input type="checkbox"/> Feedlot 4. <input type="checkbox"/> Industrial	5. <input type="checkbox"/> Public Water Supply: well ID _____ 6. <input type="checkbox"/> Dewatering: how many wells? _____ 7. <input type="checkbox"/> Aquifer Recharge: well ID _____ 8. <input type="checkbox"/> Monitoring: well ID _____ 9. Environmental Remediation: well ID _____ <input type="checkbox"/> Air Sparge <input type="checkbox"/> Soil Vapor Extraction <input type="checkbox"/> Recovery <input type="checkbox"/> Injection	10. <input type="checkbox"/> Oil Field Water Supply: lease _____ 11. Test Hole: well ID _____ <input type="checkbox"/> Cased <input type="checkbox"/> Uncased <input type="checkbox"/> Geotechnical 12. Geothermal: how many bores? _____ a) Closed Loop <input type="checkbox"/> Horizontal <input type="checkbox"/> Vertical b) Open Loop <input type="checkbox"/> Surface Discharge <input type="checkbox"/> Inj. of Water 13. <input type="checkbox"/> Other (specify): _____
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Was a chemical/bacteriological sample submitted to KDHE? Yes No If yes, date sample was submitted: _____
 Water well disinfected? Yes No

8 TYPE OF CASING USED: Steel PVC Other _____ CASING JOINTS: Glued Clamped Welded Threaded
 Casing diameter 5 in. to 305 ft., Diameter _____ in. to _____ ft., Diameter _____ in. to _____ ft.
 Casing height above land surface 12 in. Weight _____ lbs./ft. Wall thickness or gauge No. SDR17

TYPE OF SCREEN OR PERFORATION MATERIAL:
 Steel Stainless Steel Fiberglass PVC Other (Specify) _____
 Brass Galvanized Steel Concrete tile None used (open hole)

SCREEN OR PERFORATION OPENINGS ARE:
 Continuous Slot Mill Slot Gauze Wrapped Torch Cut Drilled Holes Other (Specify) _____
 Louvered Shutter Key Punched Wire Wrapped Saw Cut None (Open Hole)

SCREEN-PERFORATED INTERVALS: From 180 ft. to 300 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 GRAVEL PACK INTERVALS: From 40 ft. to 300 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.

9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other _____
 Grout Intervals: From 0 ft. to 40 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.

Nearest source of possible contamination:
 Septic Tank Lateral Lines Pit Privy Livestock Pens Insecticide Storage
 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) _____
 Direction from well? _____ Distance from well? _____ ft.

10 FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
0	10	TOP SOIL, FINE MED SAND, BROWN CLAY	200	220	TAN SANDSTONE, GRAY CLAY
10	40	FINE SAND, WHITE CLAY, WHITE CALI	220	240	GRAY SANDSTONE, GRAY CLAY
		WITH WHITE ROCK LAYERS	240	280	GRAY CLAY WITH GRAY SANDSTONE
40	60	BLUE SHALE	280	300	GRAY SANDSTONE, GRAY CLAY
60	140	BLUE SHALE WITH GRAY CLAY STREA	300	320	GRAY CLAY, GRAY SANDSTONE
140	160	BLUE CLAY			
160	180	GRAY CLAY WITH SANDSTONE STREA			
180	200	GRAY SANDSTONE WITH GRAY CLAY STREAKS			

Notes:

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) 10/27/2015 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 846 This Water Well Record was completed on (mo-day-year) 11/02/2015 under the business name of Nash Water Well Service, LLC