

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

(to rectify lacking or incorrect information)

County: Norton

**Location listed as:**

**Location changed to:**

Section-Township-Range: 8-25-21W

8-25-21W

Fraction (  $\frac{1}{4}$   $\frac{1}{4}$   $\frac{1}{4}$ ): None Given

NW NE SW

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

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

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

verification method: Written description, city street map, and mapping tool on KGS website

initials: DR date: 10/2/2006

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.

1 LOCATION OF WATER WELL: Fraction  $\frac{1}{4}$   $\frac{1}{4}$   $\frac{1}{4}$  Section Number **8** Township Number T **2** S Range Number R **21** E/W

County: **Norton**

Distance and direction from nearest town or city street address of well if located within city?  
**500 Williams St. Almena, KS 67622**

2 WATER WELL OWNER: **Steven Whitney**  
 RR#, St. Address, Box #: **500 Williams St.**  
 City, State, ZIP Code: **Almena, KS 67622**

Board of Agriculture, Division of Water Resources  
 Application Number:

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:

N
--NW-- --NE--
W                                  E
--SW-- --SE--
S

4 DEPTH OF COMPLETED WELL: **56 1/2** ft. ELEVATION: \_\_\_\_\_

Depth(s) Groundwater Encountered 1 \_\_\_\_\_ ft. 2 \_\_\_\_\_ ft. 3 \_\_\_\_\_ ft.  
 WELL'S STATIC WATER LEVEL: **30** ft. below land surface measured on mo/day/yr \_\_\_\_\_  
 Pump test data: Well water was \_\_\_\_\_ ft. after \_\_\_\_\_ hours pumping \_\_\_\_\_ gpm  
 Est. Yield \_\_\_\_\_ gpm: Well water was \_\_\_\_\_ ft. after \_\_\_\_\_ hours pumping \_\_\_\_\_ gpm

WELL WATER TO BE USED AS:  
 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 \_\_\_\_\_

5 Public water supply 8 Air conditioning 11 Injection well

Was a chemical/bacteriological sample submitted to Department? Yes \_\_\_\_\_ No ; If yes, mo/day/yr sample was submitted  
 Water Well Disinfected? Yes  No

5 TYPE OF BLANK CASING USED:  
 1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued  Clamped \_\_\_\_\_  
 2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded \_\_\_\_\_  
 7 Fiberglass Threaded \_\_\_\_\_

Blank casing diameter: **5** in. to **36 1/2** ft., Dia \_\_\_\_\_ in. to \_\_\_\_\_ ft., Dia \_\_\_\_\_ in. to \_\_\_\_\_ ft.  
 Casing height above land surface: **18"** in., weight \_\_\_\_\_ lbs./ft. Wall thickness or gauge No. **SOR 21**

TYPE OF SCREEN OR PERFORATION MATERIAL:  
 1 Steel 3 Stainless Steel 5 Fiberglass 7 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 Guazed wrapped 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) \_\_\_\_\_ ft.

SCREEN-PERFORATED INTERVALS: From **36 1/2** ft. to **56 1/2** ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
 From \_\_\_\_\_ ft. to \_\_\_\_\_ ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

GRAVEL PACK INTERVALS: From **20** ft. to **56 1/2** ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
 From \_\_\_\_\_ ft. to \_\_\_\_\_ ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other \_\_\_\_\_

Grout Intervals: From **0** ft. to **20** ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

What is the nearest source of possible contamination:  
 1 Septic tank 4 Lateral lines 7 Pit privy 11 Fuel storage 14 Abandoned water well  
 2 Sewer lines 5 Cess pool 8 Sewage lagoon 12 Fertilizer storage 15 Oil well/Gas well  
 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 13 Insecticide storage 16 Other (specify below) \_\_\_\_\_

Direction from well? \_\_\_\_\_ How many feet? \_\_\_\_\_

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
<b>0</b>	<b>44</b>	<b>Top soil + clay</b>			
<b>44</b>	<b>52</b>	<b>Sand med + large mixed loose flat</b>			
<b>52</b>	<b>54</b>	<b>ochre + clay</b>			
<b>54</b>	<b>56 1/2</b>	<b>Shale</b>			

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) **9-9-05** and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's Licence No **428** This Water Well Record was completed on (mo/day/year) **9-12-05** under the business name of **STALDER DRILLING** by (signature) **Jerry L Stalder**

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, 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 constructed well.