

County: Clark Fraction: NW SW SE NW Sec. 36 T 31 S R 21 W

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

Owner: Keith Holcomb

If corrected, location was listed as:

Location changed to:

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, East 125 ft.

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

Verification method: Correspondence from drilling contractor.

Initials: DRK Date: 10/5/2017

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

<b>1 LOCATION OF WATER WELL:</b> County: Clark	Fraction NW ¼ SW ¼ SE ¼ NW ¼	Section Number 36	Township Number T 31 S	Range Number R 21 <input type="checkbox"/> E <input checked="" type="checkbox"/> W
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<b>2 WELL OWNER:</b> Last Name: Holcomb First: Keith Business: Address: PO Box 2825 Address: City: Albany State: TX ZIP: 76430	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"/> Old Highway 34 & County Road 31, North 1 mile, East 1/2 mile
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**3 LOCATE WELL WITH "X" IN SECTION BOX:**

N

NW	NE
SW	SE

S

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

**4 DEPTH OF COMPLETED WELL:** .....120..... ft.

Depth(s) Groundwater Encountered: 1) .....19..... ft.  
2) ..... ft. 3) ..... ft., or 4)  Dry Well

WELL'S STATIC WATER LEVEL: .....19..... ft.

below land surface, measured on (mo-day-yr) 06/27/2016  
 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: .....15.....gpm  
Bore Hole Diameter: 1.25 in. to .....120..... ft. and  
..... in. to ..... ft.

**5 Latitude:** .....37.302219.....(decimal degrees)  
**Longitude:** .....99.557735.....(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:** 1983 .....ft.  Ground Level  TOC  
Source:  Land Survey  GPS  Topographic Map  
 Other KOLAR.....

**7 WELL WATER TO BE USED AS:**

1. Domestic: <input checked="" type="checkbox"/> Household <input type="checkbox"/> Lawn & Garden <input type="checkbox"/> Livestock	5. <input type="checkbox"/> Public Water Supply: well ID .....	10. <input type="checkbox"/> Oil Field Water Supply: lease .....
2. <input type="checkbox"/> Irrigation	6. <input type="checkbox"/> Dewatering: how many wells? .....	11. Test Hole: well ID .....
3. <input type="checkbox"/> Feedlot	7. <input type="checkbox"/> Aquifer Recharge: well ID .....	<input type="checkbox"/> Cased <input type="checkbox"/> Uncased <input type="checkbox"/> Geotechnical
4. <input type="checkbox"/> Industrial	8. <input type="checkbox"/> Monitoring: well ID .....	12. Geothermal: how many bores? .....
	9. Environmental Remediation: well ID .....	a) Closed Loop <input type="checkbox"/> Horizontal <input type="checkbox"/> Vertical
	<input type="checkbox"/> Air Sparge <input type="checkbox"/> Soil Vapor Extraction	b) Open Loop <input type="checkbox"/> Surface Discharge <input type="checkbox"/> Inj. of Water
	<input type="checkbox"/> Recovery <input type="checkbox"/> Injection	13. <input type="checkbox"/> Other (specify): .....

**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 .....6..... in. to .....120..... ft., Diameter ..... in. to ..... ft., Diameter ..... in. to ..... ft.

Casing height above land surface .....15..... 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 .....20..... ft. to .....60..... ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.

**GRAVEL PACK INTERVALS:** From .....18..... ft. to .....120..... ft., From .....0..... ft. to .....5..... ft., From ..... ft. to ..... ft.

**9 GROUT MATERIAL:**  Neat cement  Cement grout  Bentonite  Other .....

Grout Intervals: From .....5..... ft. to .....18..... 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	5	Top soil.			
5	60	Fine coarse sand			
60	80	Fine medium sand			
80	140	Fine light sand. Red Clay streaks			
140	160	Fine coarse clay. Red/blue shale.			

**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) 06/27/2016..... 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) 07/01/2016..... under the business name of Nash Water Well Service, LLC.....