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

(to rectify lacking or incorrect information)

Location listed as:	County: <u>Meade</u> Location changed to:
Section-Township-Range: 8 - 29 W	8- 335-29W
Fraction ( 1/4 1/4 1/4):	SE NW NW
Other changes: Initial statements:	
Changed to:	
Comments:	·
verification method: Written & legal descri	ptions, position on plat map,
and county map.	initials: ORL date: 7/5/2005

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.

	ION OF WA	TER WELL:	Fraction				1212 ID I tion Number		Number	R	ange Nun	nber
	Meade		NW 1/4	NW 1/4	SE 14		8	Т	S	R	29	E/N
pisianice af	nd direction	from nearest tow	n or city street			thin city?						
45+	44 E \$	from Pla	enin									
WATER	WELL OW	NER: Lyman	Brown									
_	dress, Box	•						Board of A	Agriculture, E	Division o	of Water R	esource
City, State,			s KS 67	P69					n Number:			
LOCATE	WELL'S LO	CATION WITH			VELL	.55	ft. ELEV	ATION:				
	SECTION							ft. 2				
	Ņ		WELL'S STATI	C WATER LEV	EL /40	ft. belo	w land surfa	ice measured on n	no/day/yr	4-11	-05	
		!	Pu	mp test data:	Well water v	vas	ft.	after	hours p	umping.		gp
	-NW	- NE						after				gp
	1		MELL WATER  Domestic			ıblic water s I field water	supply	<ul><li>8 Air conditionii</li><li>9 Dewatering</li></ul>	•	njection v	well ecify belo	(w)
w	1	E	2 Irrigation		rial 7 Do	mestic (law	n & aarden)	10 Monitoring w	ell			· • • • • • • • • • • • • • • • • • • •
"	!		g			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,					
L.	-sw	- SE	\\\\-\-\-\-\-\-\-\-\\\\\\\\\\\\\\\\\\\	-1/1	_11_			Was No &		/ <del>-   -   -   -   -   -   -   -   -   - </del>		
	-SW -	- 3E	was a chemic	al/bacteriologic	ai sampie su	ibmitted to L		Yes No		no/day/yi	rs sample No	
:	i	1	milled				•	vater vven Disirilet	icu: 165	_	140	
	Ś										,	
_		CASING USED:		5 Wrought in		8 Concre			DINTS: Glue			
1 Stee 2 PVC		3 RMP (SF	₹)	<ul><li>6 Asbestos-</li><li>7 Fiberglass</li></ul>		,	specify belo	w)				
		4 ABS	: A					ft., C				
								Ibs./ft. Wall thick				
•	_			in., weign	ıt	_						
		R PERFORATION 3 Stainless		5 Fiberglass		<b>⊘</b> PV	C IP (SR)		sbestos-Cen ther (Specify			
1 Stee 2 Bras		4 Galvaniz		6 Concrete		9 AB			one used (or			
									(-)			holo)
		RATION OPENIN			6 Wire w	d wrapped		8 Saw cut 9 Drilled holes	:	II NO	ne (open	iole)
	tinuous slot vered shutte		ill slot		7 Torch o			10 Other (spec				1
				215	4	155	4	n	4 4-			٠.,
SCHEEN-P	PERFORAL	ED INTERVALS:	From		II. IO ft to		ft Fron	n n	ft to	) )		
(	GRAVEL PA	CK INTERVALS:	From	20	ft. to	255	ft., Fror	n	ft. to	)		
			From		ft. to		ft., Fror	n	ft. to	)		1
	T MATERIA		cement	2 Cement		<b>Ø</b> Bent		4 Other				
Grout Inter	vals: Fror	n -		H Fro	om			# From		tt to	•••••	
		•				π. το			_			
What is the		urce of possible	contamination:			π. το	10 Live	stock pens	<b>(4)</b>	Abandon	ed water	well
What is the 1 Sep	tic tank	urce of possible 4 Later	contamination: al lines	7	7 Pit privy		10 Live 11 Fuel	stock pens storage	15 (	Abandon Dil well/G	as well	
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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.