

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

County: HARPER

Location listed as:

Location changed to:

Section-Township-Range: \_\_\_\_\_

35-33-9w

Fraction (  $\frac{1}{4}$   $\frac{1}{4}$   $\frac{1}{4}$ ): \_\_\_\_\_

SW SW SW

Other changes: Initial statements: COUNTY LISTED ON WWC5 AS BARBER

Changed to: HARPER COUNTY

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

verification method: COUNTY MAP

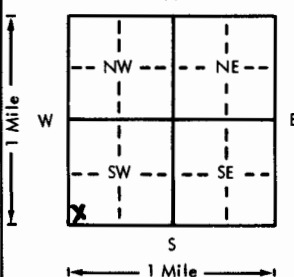
initials: EW date: 10-02-2007

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.

USE TYPEWRITER OR BALL POINT PEN—PRESS FIRMLY, PRINT CLEARLY.

WATER WELL RECORD  
KSA 82a-1201-1215

Kansas Department of Health and Environment—Division of Environment (Water well Contractors)  
Topeka, Kansas 66620

<input checked="" type="checkbox"/> Location of well:	County <b>Barber</b>	Fraction <b>SW 1/4 SW 1/4 SW 1/4</b>	Section number <b>35</b>	Township number <b>T 33 S R 9</b>	Range number <b>9</b>
2. Distance and direction from nearest town or city: <b>2 1/2 miles N. &amp; 2 miles E. of Corwin, Kansas</b> Street address of well location if in city:			3. Owner of well: <b>Barber County RWD No. 2</b> R.R. or street: <b>Corwin, Kansas</b> City, state, zip code:		
<input checked="" type="checkbox"/> Locate with "X" in section below: 		Sketch map: <b>(214' E. &amp; 400' N. of SW corner)</b> <b>Well No. 1 (TH1-76)</b>		6. Bore hole dia. <b>30</b> in. Completion date <b>11/2/76</b> Well depth <b>41</b> ft. ___ Cable tool ___ Rotary ___ Driven ___ Dug ___ Hollow rod ___ Jetted ___ Bored <input checked="" type="checkbox"/> Reverse rotary	
5. Type and color of material		From	To	8. Use: ___ Domestic <input checked="" type="checkbox"/> Public supply ___ Industry ___ Irrigation ___ Air conditioning ___ Stock ___ Lawn ___ Oil field water ___ Other	
Sandy soil		0	3	9. Casing: Material <b>Stl.</b> Height: Above or below Threaded ___ Welded <input checked="" type="checkbox"/> Surface <b>36</b> in. RMP ___ PVC ___ Weight <b>62.58</b> lbs./ft. Dia. <b>36</b> in. to <b>36</b> ft. depth Wall Thickness: inches or Dia. <b>16</b> in. to <b>24</b> ft. depth gage No. <b>375</b>	
Brown silt		3	6	10. Screen: Manufacturer's name <b>Doerr Metal Products Co.</b> Type <b>St. Stl.</b> Dia. <b>16"</b> Slot/gauze <b>1/16</b> Length <b>12'</b> Set between <b>24</b> ft. and <b>36</b> ft. ft. and ft.	
Fine to med. sand		6	18	Gravel pack? <input checked="" type="checkbox"/> Yes Size range of material <b>1/8 x 1/4</b>	
Red clay		18	21	11. Static water level: ___ mo./day/yr. <b>12.8</b> ft. below land surface Date <b>11/1/76</b>	
Med. to coarse sand & gravel		21	34	12. Pumping level below land surfaces: <b>24.6</b> ft. after <b>23</b> hrs. pumping <b>430</b> g.p.m. ft. after ___ hrs. pumping ___ g.p.m. Estimated maximum yield <b>500</b> g.p.m.	
Med. to coarse sand & coarse gravel		34	36	13. Water sample submitted: ___ mo./day/yr. Yes <input checked="" type="checkbox"/> No Date	
Red shale		36	41	14. Well head completion: <b>Steel Plate</b> ___ Pitless adapter <b>36</b> inches above grade	
				15. Well grouted? <input checked="" type="checkbox"/> Yes With: ___ Neat cement ___ Bentonite <input checked="" type="checkbox"/> Concrete Depth: From <b>0</b> ft. to <b>20</b> ft.	
				16. Nearest source of possible contamination: ft. <b>2850</b> Direction <b>West</b> Type <b>Farm</b> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes ___ No	
				17. Pump: ___ Not installed Manufacturer's name <b>Layne &amp; Bowler</b> Model number <b>6" PPHC HP 20</b> Volts <b>440</b> Length of drop pipe <b>30</b> ft. capacity <b>200</b> g.p.m. Type: ___ Submersible ___ Turbine <input checked="" type="checkbox"/> ___ Jet ___ Reciprocating ___ Centrifugal ___ Other	
				20. Water well contractor's certification: This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief. <b>Layne Western Co. 102</b> Business name <b>Wichita, Kansas</b> License No. Address <b>11-9-76</b> Signed <b>[Signature]</b> Date <b>11-9-76</b> Authorized representative	
18. Elevation:	19. Remarks:				
Topography: ___ Hill ___ Slope <input checked="" type="checkbox"/> Upland ___ Valley					

T 33 S R 9  
 SW 1/4 SW 1/4 SW 1/4  
 Sec 35

Forward the white, blue and pink copies to the Department of Health and Environment

Form WWC-5