

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

<b>LOCATION OF WATER WELL:</b> County: _____	Fraction _____ 1/4 _____ 1/4 _____ 1/4 _____ 1/4	Section _____	Township T _____ S	Range R _____ <input type="checkbox"/> E <input type="checkbox"/> W
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**Owner:** \_\_\_\_\_

**Location was listed as:**

Sec. \_\_\_\_\_ T \_\_\_\_\_ S R \_\_\_\_\_ E W

Fraction: \_\_\_\_\_

**Location changed to:**

Sec. \_\_\_\_\_ T \_\_\_\_\_ S R \_\_\_\_\_ E W

Fraction: \_\_\_\_\_

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

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

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

Verification method: \_\_\_\_\_

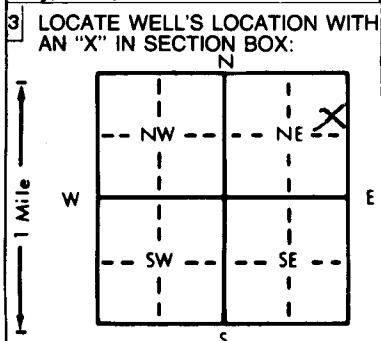
\_\_\_\_\_ initials: \_\_\_\_\_ date: \_\_\_\_\_

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: County: Seward Fraction: SE 1/4 NE 1/4 NE 1/4 Section Number: 33 Township Number: T 34 S Range Number: R 33 EW

Distance and direction from nearest town or city street address of well if located within city? 1 1/4 mi N Kansas Street

2] WATER WELL OWNER: U-Pump-It  
 RR#, St. Address, Box #: Liberal, ks 67901 Board of Agriculture, Division of Water Resources  
 City, State, ZIP Code: Liberal, ks 67901 MW #13 Application Number:



4] DEPTH OF COMPLETED WELL: 170 ft. ELEVATION:  
 Depth(s) Groundwater Encountered: 144.36 ft. 2. ft. 3. ft.  
 WELL'S STATIC WATER LEVEL: 144.36 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  
 Bore Hole Diameter: 8 in. to 170 ft., and \_\_\_\_\_ in. to \_\_\_\_\_ ft.  
 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 Lawn and garden only 10 Monitoring well  
 Was a chemical/bacteriological sample submitted to Department? Yes \_\_\_\_\_ No X; If yes, mo/day/yr sample was submitted  
 Water Well Disinfected? Yes \_\_\_\_\_ No X

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 X  
 Blank casing diameter: 4 in. to 140 ft., Dia \_\_\_\_\_ in. to \_\_\_\_\_ ft., Dia \_\_\_\_\_ in. to \_\_\_\_\_ ft.  
 Casing height above land surface: 0 in., weight 2.071 lbs./ft. Wall thickness or gauge No. .237  
 TYPE OF SCREEN OR PERFORATION MATERIAL:  
 1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 10 Asbestos-cement 11 Other (specify) \_\_\_\_\_  
 2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 12 None used (open hole)  
 SCREEN OR PERFORATION OPENINGS ARE:  
 1 Continuous slot 3 Mill slot 5 Gauzed 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) \_\_\_\_\_  
 SCREEN-PERFORATED INTERVALS: From 140 ft. to 170 ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
 From \_\_\_\_\_ ft. to \_\_\_\_\_ ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
 GRAVEL PACK INTERVALS: From 138 ft. to 170 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 134 ft., From 134 ft. to 138 ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
 What is the nearest source of possible contamination:  
 1 Septic tank 4 Lateral lines 7 Pit privy 10 Livestock pens 14 Abandoned water well  
 2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 15 Oil well/Gas well  
 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer storage 16 Other (specify below) Contaminated site  
 13 Insecticide storage

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

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	2	surface	108	117	fine to med sand
2	10	silty clay w/clay strks	117	150	clay & caliche w/sand strks
10	15	fine sand w/clay strks	150	158	fine to med sand w/churd
15	18	clay	158	170	hard cemented sand
18	30	fine sand w/clay lenses			
30	38	clay			
38	41	caliche			
41	57	clay			
57	75	sandstone w/clay strks			
75	80	clay & caliche			
80	87	caliche			
87	97	fine sand w/clay lenses			
97	103	sandstone w/sandstrks			
103	106	sandstone & caliche w/snstrks			
106	108	caliche			

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) 12-17-98 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 554 This Water Well Record was completed on (mo/day/yr) 1-29-99  
 under the business name of Woofter Pump & Well Inc. by (signature) [Signature]

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, Topeka, Kansas 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.

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