County: Rawlins Fraction: NW NW Sec. 2 T 3 S R 35 E/(W)

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

Owner: _____

Location was listed as:	**Location changed to:**
Section-Township-Range: 2 - 35 - 3 W	2 - 3 - 35 W
Fraction (¼ ¼ ¼):	

Other changes: Initial statements: _____

Changed to: _____

Comments: _____

Verification method: S-T-R written incorrectly for Rawlins Co.

_____ initials: JLS date: 2/4/2015

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.

WATER WELL RECORD — Form WWC-5

Division of Water Resources; App. No.

1 LOCATION OF WATER WELL: County: Rawlins | Fraction: NW ¼ NW ¼ ¼ | Section Number: 2 | Township Number: T 35 S | Range Number: R 3 E(W)

Distance and direction from nearest town or city street address of well if located within city? 3/4 Mile NE of Blakemanks

Global Positioning Systems (decimal degrees, min. of 4 digits)
Latitude: 39 49 38.902
Longitude: 100 0e 33.475
Elevation:
Datum:
Data Collection Method:

2 WATER WELL OWNER:
RR#, St. Address, Box # : 17086 RD F.
City, State, ZIP Code : Atwood KS 67730.

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

N / W / E / S — X in NW

4 DEPTH OF COMPLETED WELL 29 ft.

Depth(s) Groundwater Encountered (1) 14 ft. (2) ..... ft. (3) ..... ft.
WELL'S STATIC WATER LEVEL 14 ft. below land surface measured on mo/day/yr. 10/28/14
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: 5 Public water supply 8 Air conditioning 11 Injection well
(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 .....

Was a chemical/bacteriological sample submitted to Department? Yes ..... No X; If yes, mo/day/yrs Sample was submitted ..... Water well disinfected? Yes X No .....

5 TYPE OF CASING USED: 5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued X Clamped .....
1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded .....
(2 PVC) 4 ABS 7 Fiberglass ..... Threaded .....
Blank casing diameter 4 in. to 19 ft., Diameter ..... in. to ..... ft., Diameter ..... in. to ..... ft.
Casing height above land surface ..... in., Weight 160 lbs./ft. Wall thickness or guage No. .173

TYPE OF SCREEN OR PERFORATION MATERIAL:
1 Steel 3 Stainless Steel 5 Fiberglass (7 PVC) 9 ABS 11 Other (Specify) .....
2 Brass 4 Galvanized Steal 6 Concrete tile 8 RM (SR) 10 Asbestos-Cement 12 None used (open hole)

SCREEN OR PERFORATION OPENINGS ARE:
1 Continuous slot 3 Mill slot 5 Gauzed wrapped 7 Torch cut 9 Drilled holes 11 None (open hole)
2 Louvered shutter 4 Key punched 6 Wire wrapped (8 Saw Cut) 10 Other (specify) .....

SCREEN-PERFORATED INTERVALS: From 19 ft. to 29 ft., From ..... ft. to ..... ft.
From ..... ft. to ..... ft., From ..... ft. to ..... ft.
GRAVEL PACK INTERVALS: From 10 ft. to 29 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 6 ft. to 12 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 10 Livestock pens 13 Insecticide Storage 16 Other (specify below)
2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 14 Abandoned water well
3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer Storage 15 Oil well/gas well .....
Direction from well? South of well How many feet? 400'

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	10	soil & clay.			
10	14	fine to course sand & some clay.			
14	16	fine to course sand & some small gravel.			
16	23	fine to course sand & clay 3/4 sand.			
23	25	fine to course sand & floating shale.			
25	30	shale.			

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) 10/28/14 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 425 This Water Well Record was completed on (mo/day/year) 10/28/14 under the business name of Burton Well Drilling by (signature) Pat Burton

INSTRUCTIONS: Use typewriter or ball point pen. *PLEASE PRESS FIRMLY* and *PRINT* clearly. Please fill in blanks, underline or circle the correct answers. Send t three copies to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telepho 785-296-5522. Send one to WATER WELL OWNER and retain one for your records. Fee of $5.00 for each constructed well. Visit us http://www.kdheks.gov/waterwell/index.html.

KSA 82a-1212